

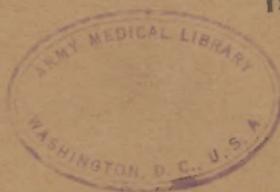
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# PUBLIC HEALTH LAWS AND REGULATIONS



JANUARY 1, [REDACTED]  
1942



SOUTH DAKOTA BOARD OF HEALTH

J. F. D. Cook, M.D., Superintendent

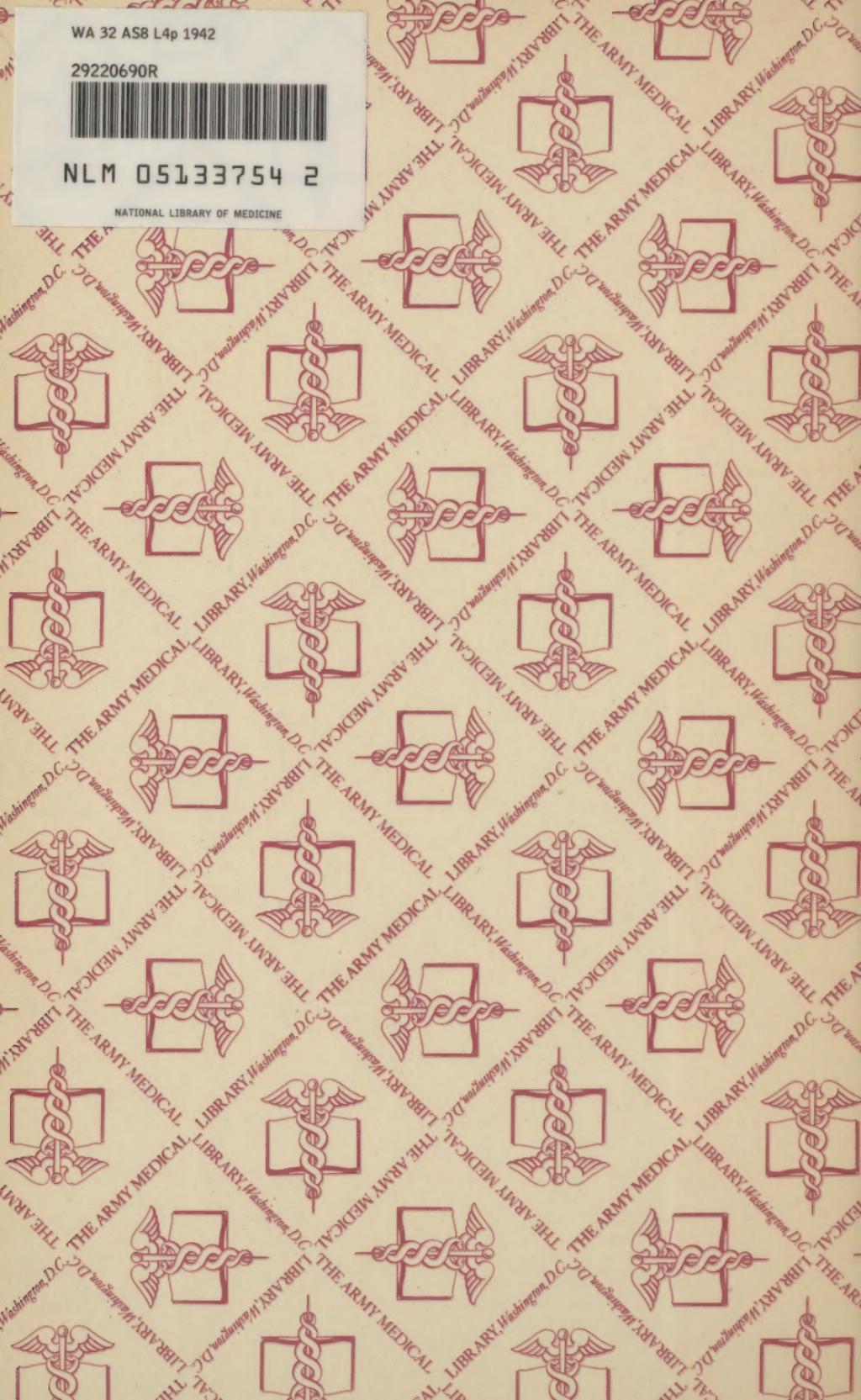
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# PUBLIC HEALTH LAWS AND REGULATIONS



JANUARY 1, 1940  
1942



SOUTH DAKOTA BOARD OF HEALTH

J. F. D. Cook, M.D., Superintendent

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## DEPARTMENT OF PUBLIC HEALTH

### State of South Dakota

January 1, [REDACTED]  
1942

### STATE BOARD OF HEALTH

#### Personnel

R. J. QUINN, M.D., President .....	Burke
J. B. VAUGHN, M.D., Vice President .....	Castlewood
LYLE HARE, M.D. ....	Spearfish
M. W. MYERS, D. O. ....	Parker
J. F. D. COOK, M.D., F.A.C.S., Superintendent .....	Pierre

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Division of Administration, J. F. D. Cook, M.D., F.A.C.S., Superintendent .....	Pierre
Assistant Health Officer, G. J. Van Heuvelen, M.D., M.P.H....	Pierre
Division of Epidemiology, G. J. Van Heuvelen, M.D., M.P.H...Pierre	
Division of Maternal and Child Health and Crippled Children, Anthony Triolo, M.D., M.P.H., Director....Pierre	
Division of Sanitary Engineering, W. W. Towne, M.S., C.E., Director .....	Pierre
Division of Public Health Nursing, Alice Olson, R.N., Director..Pierre	
Division of Laboratories, J. C. Ohlmacher, M.D., Director..Vermillion	
Assistant Director of Laboratories, W. R. Giedt, M.D....Vermillion	
Director of Finance and Accounts, Esther Kempster .....	Pierre

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# SOUTH DAKOTA PUBLIC HEALTH LAWS AND REGULATIONS

South Dakota Code of 1939 and Session Laws of 1939

January 1, 1940  
1942

## PART I—LAWS

### CHAPTER 27.01

#### STATE BOARD OF HEALTH

Section 27.0101 Membership: appointment; qualifications; terms. The State Board of Health consists of five members, appointed by the Governor for terms of five years each with such terms so arranged that only one expires upon the first day of each year.

The members of such Board must be skilled and capable physicians in good standing who shall have practiced in this state not less than five years previous to appointment to the Board, and the schools of medicine known as homeopathic and osteopathic shall at all times be represented on such Board. Not more than one osteopath shall be a member of said Board and no osteopath member shall participate in the examination and licensing of any physician other than an osteopathic physician.

Section 27.0102 Officers of Board: Superintendent; president, vice president, secretary. The Governor shall in his commission of appointment designate which member of such Board shall be Superintendent thereof; the members thereof shall elect a president and vice president; and the Superintendent of such Board shall be ex officio secretary.

Section 27.0103 Compensation and expenses of Board. The Superintendent of such Board shall devote his time and attention to the performance of his duties, and shall receive an annual salary of thirty-two hundred dollars and his actual and necessary expenses.

The other members of such Board shall receive as their compensation the sum of five dollars per day while actually engaged in the performance of their duties, and in addition thereto, the necessary traveling expenses.

The accounts of the members of such Board for expenses and per diem shall be audited by the Superintendent thereof and paid out of the State Treasury on the warrant of the Auditor upon properly certified vouchers.

Section 27.0104 General powers and duties; meetings. Such Board shall hold quarterly meetings in each year, two of which shall be at the state capital, and other meetings at such times and places as the Superintendent of the Board shall designate, and shall have the power:

- (1) To license and regulate the practice of medicine and surgery within this state and to make all rules and regulations which may be necessary or expedient to that end;
- (2) To exercise general supervision over all health officers and boards, to take any active measures for the prevention and eradication of contagious or communicable diseases among people of the state, to investigate sanitary conditions, to learn the cause and source of disease and epidemics, to observe the effect upon human health of localities and employments, and to gather and diffuse proper information upon all subjects to which its duties relate; to gather, collate, and publish medical and vital statistics of general value, and to advise all state officials and boards in hygiene and medical matters, especially those involved in the proper location, construction, sanitation, and administration of prisons, hospitals, asylums, and other public institutions;
- (3) To adopt, alter, and enforce, after approval by the Attorney General, and after due publication as required by this chapter, orders, directions, or regulations not inconsistent with the statutes of the state of permanent application or for specified periods throughout the whole or any part of the state, as may be necessary for the preservation and protection of the public health; such regulations as shall be designed to preserve and protect the public health, and by which said Board may regulate by requiring the taking out of licenses or other appropriate means, control, and, in proper cases, prohibit and suppress any of the following matters:
  - (a) The manufacture into articles of commerce, other than food, of diseased, tainted, or decayed animal or vegetable matter.
  - (b) The business of scavenging and the disposal of sewerage;
  - (c) The location of mortuaries and cemeteries and the removal and burial of the dead;
  - (d) The management of lying-in houses and boarding places for infants, and the treatment of infants therein;
  - (e) The pollution of streams and other waters and the distribution of water by private persons for drinking or domestic use;

- (f) The construction and equipment, in respect to sanitary conditions, of schools, hospitals, almshouses, prisons, and other public institutions;
- (g) The treatment in hospitals and elsewhere of persons suffering from communicable diseases, the disinfection and quarantine of persons and places in case of such disease, and reporting of sickness and deaths therefrom;
- (h) The accumulation of filthy and unwholesome matter to the injury of public health, and the removal thereof;
- (i) To require the superintendent of vital statistics to furnish all information that he may have regarding vital statistics;
- (j) The supervision of slaughterhouses;
- (k) The distribution by State Board of Health of biological products to members of the county boards of health, which products shall be used for the cure and prevention of diphtheria and other communicable diseases;

(4) It shall be the duty of the State Board of Health and said Board is hereby empowered and directed to adopt such rules and regulations as are necessary to participate with the government to the United States in the administration of Title VI of the Federal Social Security Act relating to public health work; of Part 2 of Title V of the Federal Social Security Act relating to services for crippled children; and Part 1 of Title V of the Federal Social Security Act relating to maternal and child health services. The State Board of Health is hereby designated as the sole state agency within the state of South Dakota to receive and administer and disburse federal appropriations, benefits, grants, and allotments made available to the state under said federal statutes together with such funds as may be made available by the state. Said Board of Health is empowered to adopt all rules and regulations and make such orders and findings of fact as are appropriate or necessary to conform to the federal rules and regulations promulgated for the purpose of administering the activities referred to in said federal acts and to conform to the rules and regulations of the federal agencies. Whenever the provisions of medicinal care or the appointment of physicians shall be contemplated under this section, no standards for services or eligibility for appointment shall give any preference to graduates of any particular school or system of medicine.

Section 27.0105 Regulations: publication required; copies admissible in evidence. The regulations of the State Board of Health if of general application throughout the state shall be published in a daily newspaper of general circulation in the state once each

week for three consecutive weeks; if of local application only, as near such locality as practicable, which publication shall be made in an official newspaper of the county where such publication is made. Special rules applicable to particular cases shall be sufficiently published when posted.

Copies of such regulations when certified by the Superintendent of the Board shall be admissible in evidence without further proof.

Section 27.0106 Unorganized counties: jurisdiction of Board; county health officers authorized. The jurisdiction of the State Board of Health shall extend over all the unorganized counties within the state and the Board shall have the same authority therein with reference to quarantine and other health matters as any local board of health might have in organized territory. Upon the recommendation of the State Board of Health the Governor may appoint a county health officer or a county board of health in any unorganized county, which health officer or the board, subject to the supervising control of the State Board of Health, shall have the same power and authority as county boards of health and health officers in organized counties, and proper provision shall thereafter be made in the annual tax levy for the maintenance of such county health officer or board.

Section 27.0107 Quarantine: interstate carriers; authority of Board. Whenever necessary the Board may establish and enforce a system of quarantine against the introduction into the state of any plague or other communicable disease by common carriers doing business across its borders. Its members, officers, and agents may board any conveyance used by such carriers to inspect the same and if it be found infected, may detain such conveyance and isolate and quarantine any or all persons found thereon, with their luggage, until all danger of disease therefrom is removed.

Section 27.0108 Court Jurisdiction: nuisances; private rights; not affected by chapter. Nothing contained in this chapter shall be so construed as to affect the powers of the courts to administer the usual legal and equitable remedies in case of nuisances or of improper interference with private rights.

Section 27.0109 Jurisdiction of Secretary of Agriculture: not affected by chapter. Nothing in this chapter shall be so construed as to interfere with the powers and duties of the Secretary of Agriculture.

Section 27.0110 Children: parental jurisdiction not affected. In the administration of this chapter no official, agent, or representative of this state shall enter any home or take charge of any

child over the objection of the parents, or either of them, or the person standing in loco parentis or having the custody of such child. Nothing in this chapter shall be construed as limiting the power of a parent or guardian or person standing in loco parentis to determine what treatment or correction shall be provided for a child, or the agency or agencies to be employed for such purpose.

Section 27.0111 Biennial report of Board: requirement; limitations. Such Board shall make a biennial report to the Governor within the time and in the manner provided by law, which shall be limited to twenty pages, showing its proceedings and containing such recommendations as it may deem expedient.

Section 27.0113 Records of proceedings; register of licensing of persons and institutions: required content; admissibility in evidence. Such Board shall keep a correct record of all its proceedings and the same shall be open for public inspection. It shall also keep a register of all applicants for a license to practice as a physician and surgeon, or either, within the state, together with the age of such applicant, the time spent in preparation in the study of medicine, the location and name of all institutions in which such study has been pursued, the location and name of all institutions granting to applicant any degrees or certificates of lectures in medicine or surgery, and such record shall show whether the applicant was rejected or licensed, and such record or a certified copy thereof shall be prima facie evidence of all matters therein stated.

Section 27.0114 Appeals from decisions of Board: authorized; venue; procedure; bond; stay of proceedings. Any person feeling aggrieved by any action of such Board shall have the right to appeal to the Circuit Court of the county in which the person appealing resides. Such appeal shall be taken by serving upon the Superintendent of the Board within thirty days after such action by such Board a notice of appeal stating the action of the Board from which the appeal is taken; and, if an order, stating such order or the part thereof from which the appeal is taken and by filing with such Superintendent a bond in the sum of five hundred dollars conditioned for the payment of all costs of such appeal and all damages sustained by any person because of his failure to comply with the terms of such order if upon such appeal the same shall be held to be legal and valid. Upon the filing and approval of such bond, the order or part thereof appealed from shall be stayed pending the final determination of the controversy. Immediately upon the perfecting of such appeal it shall be the duty of the Superintendent to transmit to the clerk of courts of such county the notice of appeal and bond and a certified copy of

all proceedings of the Board in relation to the matter from which the appeal is taken and such cause shall thereupon stand for trial at the first regular term of Court thereafter.

Section 27.0115 Funds:, custody; disbursement. All moneys accruing to this state under the provisions of the federal statute hereinbefore mentioned and under the appropriation made herein shall be deposited in a separate fund by the State Treasurer who shall be the custodian thereof, and such funds shall be disbursed only upon warrants issued by the State Auditor upon vouchers or requisitions made by the director of the division of child hygiene, approved by the Superintendent of the State Board of Health.

## CHAPTER 27.02

### VITAL STATISTICS

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Section 27.0201 Supervision and enforcement: duties of State Board of Health: registration of birth, deaths, burials, marriages, divorces, naturalizations; and burial of Veterans of the armed forces of the United States, including their allies, Confederate veterans and war nurses in the time of war. The State Board of Health shall have charge of the registration of birth, deaths, burials, marriages, divorces, and naturalizations, and shall prepare the necessary instructions for obtaining such records, and shall supervise the registration of the same in each registration district and in the central bureau of vital statistics.

That for the purpose of locating the exact grave or burial space and the compiling and maintenance of an adequate and uniform burial-record-system of the burials of all deceased persons, now located, together with all subsequent burials, within all cemeteries in the State of South Dakota, including the graves of veterans of the armed forces of the United States, including the Allies, Confederate Veterans and War Nurses in the time of war, and making available such records for reporting to the United States Government under the provisions of the Federal Laws, respecting the erection of Government Headstones at the graves of such veterans or war nurses of the Army of the United States, the State Board of Health shall have charge of and shall supervise the registration of all burials in each registration district, and shall prepare the necessary instructions for obtaining, preserving as a permanent record, and maintaining the registration of all burials, by the Registrar of each Registration District, and by all Individuals, Associations, Churches, Religious and Benevolent Societies and all Public or Private Corporations, within this state, having under their care, or control any cemetery or place of burial. The said Board shall be charged with the uniform and thorough enforcement of the law throughout the state and shall from time to time make such rules and regulations, not inconsistent with the laws of this state, necessary for the carrying out of such registration.

Section 27.0202 Director of vital statistics: Superintendent of State Board of Health, ex officio; prepares blanks and instructions; office at capital. The Superintendent of the State Board of Health shall be the director of vital statistics and shall administer the provisions of this chapter and shall have supervision over the central bureau of vital statistics which shall be established by the State Board.

The director shall prepare, print and supply to all registrars, all blanks and forms used in registering, recording, and preserving the reports and returns, or in otherwise carrying out the purposes of this chapter, and shall prepare and issue such detailed instructions as may be necessary to procure the uniform observance of its provisions and the maintenance of a perfect system of registration. No other blanks shall be used than those so supplied by the state director.

The director shall have an office at the capital properly equipped with fire proof vaults and filing cases for the preservation and safekeeping of the official records and papers pertaining thereto.

Section 27.0203 Registration districts: each county separate district; clerk of courts local registrar, city health officer may be registrar, deputy registrars; subregistrars; duties. Each organized county of this state shall constitute a separate registration district, and no smaller or other district shall be designated. The clerk of courts shall be the local registrar of vital statistics for each registration district in this state. In cities where health officers or other officers are, in the judgment of the State Board of Health, conducting effective registration of births and deaths, such officers may be appointed as registrars in and for such cities, and shall be subject to the rules and regulations of the State Board of Health and to all the provisions of this chapter. Each local registrar shall appoint a deputy whose duty it shall be to act in his stead in case of the absence or disability of such local registrar; such deputy shall in writing accept such appointment and be subject to all rules and regulations governing local registrars. When it appears necessary for the convenience of the inhabitants of any rural district, the local registrar may, with the approval of the director, appoint one or more suitable persons to act as subregistrars, who shall be authorized to receive certificates and to issue burial or removal permits in and for such portions of the district as may be designated; each subregistrar shall note on each death certificate, over his signature, the date of filing and shall forward all such certificates to the local registrar of the district within ten days, and in all cases before the third day of the following month. Each subregistrar shall be subject to the supervision and control of the director and may be by him removed for neglect or failure to perform his duty, and shall be subject to the same penalties for neglect of duty as the local registrar.

Section 27.0204 Physicians and undertakers to register with local registrars: co-operation in registration requirements; copy of law, rules, and regulations furnished; report of registering physicians and undertakers. Every physician and undertaker shall

without delay register his name, address, and occupation with the local registrar of the district in which he resides and shall thereupon be supplied by the local registrar with a copy of this chapter together with a copy of such rules and regulations as may have been adopted by the director of the State Board of Health.

Within thirty days after the close of each calendar year each local registrar shall make a return to the director of all physicians and undertakers who have been registered in his district during the preceding calendar year. No fee or other compensation shall be charged by the local registrar to physicians or undertakers for registering their names as provided in this section or making returns thereof to the director.

Section 27.0205 Hospitals, almshouses, other institutions to keep record of inmates: required content of record; record open to inspection of director. All superintendents, or managers, or other persons in charge of hospitals, almshouses, lying-in, or other institutions, public or private, to which persons resort for treatment of disease, confinement, or are committed by process of law, shall make and keep a record of all the personal and statistical particulars relative to the inmates, such record to be made at the time of their admittance and in such form of certificate as directed by the director. In case of persons admitted or committed for treatment of disease, the physician in charge shall specify for entry in such record the nature of the disease and where in his opinion it was contracted. The personal particulars and information required by this section shall be obtained from the individual himself, if it is practicable to do so, and when not so practicable, shall be obtained in as complete a manner as possible from relatives, friends, or other persons acquainted with the facts. Such record shall be open at all times to the inspection of the director or his accredited agent.

Section 27.0206 Marriage and divorce records: clerk of courts forwards to director monthly; fee of clerk. The clerk of courts of each county, on or before the tenth day of each month, shall transmit to the director abstracts of the records of the marriages performed in his county, and of the decrees of divorce which may have been filed in his office, and of all naturalizations, during the preceding calendar month. The clerk of courts shall be entitled to a fee of ten cents for each abstract of marriage, divorce, or naturalization record transmitted by him, such fees to be paid out of the general fund of the county as provided in this chapter.

Section 27.0207 Birth certificates: requirements; content; when and where filed. The birth of each and every child born in this state shall be registered as hereinafter provided. Within ten days

after the date of each birth there shall be filed with the local registrar of the district in which the birth occurred, a certificate of such birth, which certificate shall be upon the form prescribed by the director.

In each case where a physician was in attendance upon the birth it shall be the duty of such physician to file, in accordance herewith, the certificate herein provided for. In each case where there was no physician in attendance upon the birth, it shall be the duty of the father or mother of the child, the householder, or owner of the premises or the manager or superintendent of the public institution or private institution where the birth occurred, in the order named, within ten days after the date of such birth, to report to the local registrar the fact of such birth. In such case, or in case the physician in attendance upon the birth is unable by diligent inquiry to obtain any item or items of information required by the director, it shall then be the duty of the local registrar to secure from the person so reporting, or from any other person having the required knowledge, such information as will enable him to prepare the certificate of birth herein provided for, and it shall be the duty of the person so reporting, or who may be interrogated in relation thereto, to answer accordingly and to the best of his knowledge, all questions put to him by the local registrar which may be necessary to gain any information needed to make a complete record of the birth, and it shall be the duty of the informant to subscribe his signature to such statement, when requested to do so by the local registrar.

When any certificate of birth of a living child is presented without the statement of the given name, then the local registrar shall make out and deliver to the parents of the child a special blank for a supplemental report of the given name of the child, which shall be filled out as directed and returned to the local registrar as soon as the child shall have been named.

Section 27.0208 Death certificate when physician in attendance: requirement; content; return. The physician, if any, last in attendance on the deceased, shall make and sign a medical certificate which shall specify the time in attendance, the time he last saw the deceased alive, and the hour of the day at which death occurred. Such certificate shall further state the cause of death, so as to show the course of disease or sequence of causes resulting in death, giving first the name of the disease causing death, primary cause, and the contributory secondary cause, if any, and the duration of each. Indefinite and unsatisfactory terms denoting only symptoms of disease or conditions resulting from disease shall not be sufficient for the issuance of a burial or removal permit, and any certificate containing only such terms as defined by the

director, shall be returned to the physician or person making the medical certificate for correction and more definite statement. Causes of death which may be the result of either disease or violence shall be carefully defined, and if from violence, the means of injury shall be stated and whether probably accidental, suicidal, or homicidal. For deaths in hospitals, institutions, or of non-residents, the physician shall supply the information required by the rules and regulations of the State Board of Health, if he is able to do so, and shall state where, in his opinion, the disease was contracted.

Section 27.0209 Death certificate: no attending physician; how made; duty of undertaker, local registrar; refer to coroner in certain cases. In case of any death occurring without the attendance of a licensed physician, it shall be the duty of the undertaker to notify the local registrar of such death, and when so notified such registrar shall make the medical certificate and return from the statement of relatives or other persons having adequate knowledge of the facts.

If the local registrar has reason to believe that the death may have been due to other than natural causes, he shall then refer the case to the coroner or other proper officer whose duty it is to hold an inquest on the body of any deceased person, for his investigation and certification.

The coroner, or such other proper officer, shall state in such certificate the name of the disease causing death, or if from external cause:

- (1) The means of death;
- (2) Whether probably accidental, suicidal, or homicidal; and
- (3) In addition furnish such information as may be required by the director in order to properly classify the death.

Section 27.0210 Death Certificate: when and by whom filed; content; burial permit; how obtained, contents, issued in duplicate; undertaker's duties. The undertaker, or person acting as undertaker, shall file the certificate of death with the registrar of the district in which the death occurred, and obtain a burial or removal permit prior to the disposition of the body. He shall obtain the required personal and statistical particulars from the person best qualified to supply them; over the signature and address of his informant. He shall then present the certificate to the attending physician, if any, or to the health officer or coroner as directed by the local registrar, for the medical certificate of the cause of death and other particulars necessary to complete the record, as provided by the regulations of the State Board of Health.

He shall then recite in such certificate all required facts relative to the date and exact place of burial or removal, giving the name of cemetery, date of burial or removal, name of county and city or nearest post office wherein interment is to be made, over his signature and with his address, and present the completed certificate to the registrar in order to obtain a permit for burial, removal, or other disposition of the body.

The registrar upon the filing of such certificate of death shall issue, in duplicate copies and on forms provided by the State Board of Health, a permit for burial, removal, or other disposition of the body. The undertaker shall deliver, to the person in charge of the cemetery or place of burial, before interring or otherwise disposing of the body, one copy of the burial or removal permit and on the original copy of such burial or removal permit, have such person in charge, acknowledge over his signature, his receipt of such copy, together with his verification of the information therein contained with reference to date of burial, section number, block number, lot number and grave number of the grave-space to be occupied, thereby acknowledging the exact location of such burial, for purpose of record.

The removal permit in duplicate in all cases where body is transported, shall be attached to the box containing the corpse and shall accompany the corpse to its destination, where, if within the State of South Dakota, a copy of such removal permit, shall be delivered by undertaker, to the person in charge of the place of burial in the manner and as hereinbefore provided.

The undertaker or person acting as undertaker shall within ten days thereafter, file or transmit the original copy of such burial or removal permit, to the local registrar of the county in which interment was made.

Section 27.0211 Burial permit: required before burial or removal; how and when issued; registrars or justices of the peace may issue; bodies moved into state, foreign certificate may be accepted for burial permit, fees. The body of any person whose death occurs in this state, or which shall be found dead herein, shall not be interred, deposited in a vault or tomb, cremated, or otherwise disposed of, or removed from or into any registration district, or be temporarily held pending further disposition more than seventy-two hours after death unless a permit for burial, removal, or other disposition shall have been properly issued by a registrar or justice of the peace of the registration district in which the death occurred or the body was found. No such burial or removal permit shall be issued by any registrar or justice of the peace until a certificate of death has been filed with him as provided in this chapter. When such death certificate is filed

with a justice of the peace he shall note the same upon his docket and issue in exchange therefor such burial or removal permit, and shall within three days thereafter transmit the certificate of death to the local registrar.

When a dead body is transported from outside this state into a registration district in South Dakota for burial, the removal or transit permit issued in accordance with the law and health regulations of the place where the death occurred shall be accepted by the registrar of the district into which the body has been transported for burial or other disposition as a basis upon which he may issue a local burial permit, noting upon the face of such burial permit the fact that it was a body shipped into this state for interment, and giving the actual place of death.

No registrar shall receive any fee for the issuance of burial or removal permits other than those provided in this chapter.

Section 27.0212 Burial within state: information of veterans; form of permit; copy for cemetery record. If the interment or other disposition of the body is to be made within the state, the wording of the burial or removal permit shall contain a statement by the Registrar or Justice of the Peace, and over his signature that a satisfactory certificate of death having been filed with him as required by law, permission is granted to inter, remove, or otherwise dispose of the body, stating therein the following information: name of deceased, age, sex, cause of death, date and place of death, name of cemetery, date of burial, and describing the exact location of grave-space or burial by section number, block number, lot number, and grave number of burial-space in the cemetery, wherein interment is to be made, and the name of the owner of such lot or grave-space, and such other necessary information as may be prescribed by the State Director. Upon the application for a burial or removal permit for any honorably discharged veteran of the armed forces of the United States, including their allies, Confederate veterans and war nurses in the time of war, the Registrar or Justice of the Peace, in addition to the above information, and as a prerequisite to the issuing of the burial permit, shall require applicant to furnish and be noted upon such permit the following information: date of entering service, organization and company served in, rank, serial number, whether disabled in service, cause of disability, foreign or distinguished service, and the full name and address of next of kin. That burial or removal permit forms as provided by regulation of the State Board of Health, shall provide appropriate space for the name of the cemetery, together with an acknowledgment of receipt of a true copy of such permit by the person in charge of the cemetery or place of burial and space for such person's signature and address.

Section 27.0213 Casket sales: record required; report to director; copy of regulations to be inclosed in caskets. Every person, firm, or corporation selling a casket shall keep a record showing the name of the purchaser, his post office address, the name, date, and place of death of the deceased, the cause of death, the name and address of attending physician, the means and place of disposal of the body, which record shall be open to inspection of the director at all times. On or before the fifth day of each month such person, firm, or corporation shall report to the director each sale of a casket for the preceding month on a blank provided for that purpose. This section shall not apply to persons, firms, or corporations selling caskets to dealers or undertakers.

Every person, firm, or corporation selling caskets at retail and not having charge of the disposition of the body, shall inclose within the casket a notice furnished by the director calling attention to the requirements of the law, a blank certificate of death, and the rules and regulations of the State Board of Health concerning the burial or other disposition of the dead body.

Section 27.0214 Cemetery record: providing for plat or map of cemetery; filing of plat or map in Registrar's office; cemeteries refuse burial without permit; indorsement and return of burial permit; record.

(1) That every person, firm, or association, every church, religious or benevolent society, and private or public corporation, owning or having under his or its control, any cemetery or place of burial in this state, shall keep and maintain a uniform record of all burials, and shall by itself, his or its officers or agents cause such cemetery or burial ground, or such portion thereof as may from time to time become necessary for that purpose, to be surveyed, mapped or diagrammed, and subdivided into sections, blocks, lots, individual grave spaces, avenues, walks and streets, thereby platting or making a map or diagram thereof, which map or plat shall be filed, preserved and maintained as a permanent cemetery record. That such plat or map, or copy thereof, shall be dated and endorsed by the person, firm or agency drafting such plat or map, and duly filed in the office of the Registrar of the registration district, wherein located, and shall become a permanent record in such office. That each Section, Block, Lot and individual grave-space in cemetery shall be regularly numbered, such numbers to appear and be marked upon the face thereof, and such map or plat when completed shall have designated thereon, by uniform marking appearing in the proper grave-spaces, all present burials and occupied graves located within such cemetery. That the graves of all veterans of the armed forces of the United States, including their allies, Confederate veterans and war nurses in time of war, located in each cemetery be designated

by a separate and distinct uniform mark. That thereafter it shall be the duty of such person, association or corporation in charge of such cemetery or place of burial to regularly mark and designate upon such plat or map, the exact grave-space occupied at the time of interment, by all subsequent burials, within such cemetery. It being the intent and purpose of the foregoing provision to require every cemetery or place of burial to be platted or mapped into subdivisions, indicating individual grave-spaces, thereby providing when such plat or map is placed on file in registrar's office, a numerical or tract index of all burials recorded and for no other purpose.

(2) No person in charge of any premises in which interments are made, shall inter, or permit the interment, or other disposition of any body, unless it is accompanied by a burial, removal, or transit permit as provided in this chapter. Such person shall receive from the undertaker in charge of the body, an exact and complete copy of the burial, removal or transit permit, and shall upon receipt of such copy, endorse upon the original copy thereof, the date of interment, acknowledgment of his receipt of such copy, and he shall verify or insert in space provided therefore, the exact location, as shown by the map or plat of such cemetery the section number, block number, lot number, and grave number of space in which interment is to be made adding thereto his signature. That all copies of burial or removal permits shall be retained by the person in charge of such cemetery, or place of burial and filed by him as a permanent record of such cemetery, and he shall forthwith make an exact copy of each burial or removal permit in a "Burial Record Book," together with such additional information as may be prescribed by the State Director; such "Burial Record Book" to contain an alphabetical index, listing by name, all deceased persons interred or buried in the cemetery. That such cemetery burial record shall also provide a numerical or tract index, to be maintained by designating and numbering consecutively, each burial or removal permit, such permit number to be marked or noted on the individual grave-space upon the cemetery plat or map, wherein such interment is or was made. That such person or cemetery officials shall also keep and maintain as a permanent record, the name and address of all grantees and a description of such cemetery subdivision, lot or grave-space, to whom such title has been conveyed or where certain areas have been reserved for special purposes. All such burial records together with the cemetery plat or map, shall at all times be open to official inspection.

(3) The undertaker, or person acting as such, when burying a body in the cemetery or burial ground, having no person in charge, shall sign the burial or removal permit giving the date of burial, and shall endorse on such form the words "no person in charge."

and upon his filing such burial or removal permit with the local registrar of the county in which the cemetery or burial ground is located, as provided for in this chapter, shall consult the plat or map of such cemetery on file therein, and complete such burial or removal permit by inserting in such permit form, the correct section number, block number, lot number, grave number, of the grave-space wherein the body was interred.

Section 27.0215 Genealogical records: filed, authorized; filing of authenticated transcripts authorized; transcript director's records authorized; fee; pension claimants excepted. If any cemetery company or association, or any church or historical society, association, or any other company, society, or association, or any individual, is in possession of any record of births or deaths which may be of value in establishing the genealogy of any resident of this state, such company, society, association, or individual may file such record or a duly authenticated transcript thereof with the director, and it shall be the duty of the director to preserve such record or transcript and to make a record and index thereof, which shall be open to the inspection of the public, subject to such reasonable restrictions as the director may prescribe.

The director shall furnish a transcript of any record upon application, together with a certificate that it is a true copy of such record, and for his services in so furnishing such transcript, and certificate he shall be entitled to a fee of fifty cents per hour, or fraction of an hour, necessarily consumed in making transcript, and to a fee of one dollar for the certificate, which fee shall be paid by the applicant, and when received by the director by him paid to the State Treasurer, no charge, however, shall be made for certified copies of birth, death, marriage, or divorce records when requested or required in pension claims of widows or soldiers of the Civil or Spanish-American Wars and in compensation and insurance claims of widows and soldiers of the World War.

Such transcript of the record, when certified by the director to be a true transcript, shall be *prima facie* evidence of the facts therein stated in all of the courts of this state.

Section 27.0216 Unregistered births or deaths: any citizen may furnish registration information; may make birth or death reports or certificates. Any person having knowledge of the facts pertaining to the birth or death of any person, which occurred in South Dakota or Dakota Territory at any time and which has not already been duly reported and recorded, may make a birth or death report or certificate of the same in the form prescribed for reporting births or deaths in this state, and after verifying the same by oath, deliver the same to the local registrar in the registration district in which such birth or death occurred, and such

local registrar shall record the same in his record of births or deaths and forward such report or certificate to the director who shall duly index the same but shall not include it in the report of births or deaths for the current year.

That the local registrar of each registration district within state is hereby authorized to receive and file in his office as a permanent record any information or data, retaining to burials within his registration district, recently compiled or that may hereafter be compiled by the "Graves Registration Survey Project," a state-wide survey, sponsored by the South Dakota Military Department through the cooperating sponsorship of the American Legion and under the Works Project Administration of South Dakota, together with maps or drawings of cemeteries in such district, to the end that said registrar with the cooperation of the Graves Registration Survey Project, may use such information or data in completing and bringing up to date, burial records as to all past burials; it being the intent and purpose of this law that all burials and all information pertaining thereto, including those of veterans who served in the military or naval forces of the United States in the time of war, buried within this state, be placed on record and hereafter maintained therein as a permanent record. Providing such information with reference to past burials is compiled and cemetery maps drafted and presented for filing, is without additional expense to the State of South Dakota. No registrar shall receive any fee for filing or recording such compiled burial information or cemetery map or maps.

Section 27.0217 Local registrars: duties: certificates to be completed; issue of burial permits; duplicate records; index of records; returns and reports; filing cemetery plat or map.

Each local registrar shall supply blank forms of certificates to such persons as require them, and when presented for record shall carefully examine each certificate of birth, death or burial, to ascertain whether or not it has been made out in accordance with the provisions of this chapter and the instructions of the director, and if any certificate of death is incomplete or unsatisfactory, it shall be his duty to withhold the burial or removal permit until such defects are corrected.

All certificates and burial or removal permit shall be written legibly in durable black ink and no certificate or permit shall be deemed complete and correct that does not supply all of the items of information called for therein, or the omission thereof satisfactorily accounted for. If the certificate of death is properly executed and completed, the local registrar shall then issue a burial or removal permit to the undertaker. If the return of any burial or removal permit, by the undertaker, is found to be incomplete, the

registrar shall immediately require the undertaker to supply the missing information and if such cannot be supplied, the fact shall be noted upon such permit. If the death occurred from some disease which is deemed by the State Board of Health to be infectious, contagious, or communicable and dangerous to the public health, no permit for the removal or other disposition of the body shall be issued by the registrar, except under such conditions as may be prescribed by the State Board of Health. If a certificate of birth is incomplete, the local registrar shall immediately require the informant to supply the missing information and if such cannot be supplied that fact shall be noted upon such certificate.

The local registrar shall number consecutively, the certificates of birth, death and burial or removal permits filed in his office, in three separate series, beginning with the number one for the first birth, number one for the first death, and number one for the first burial or removal permit filed, and sign thereon his name as registrar, together with the date of filing of each certificate or permit in his office, and shall also make a copy of each birth, each death certificate, and each burial or removal permit filed by him, in a record book or books to be supplied by the director and be preserved permanently in his office as a local record, and shall on the tenth day of each month transmit to the director all original certificates of birth or death, registered by him for the preceding month. If no birth or no deaths occurred in any month, he shall, on or before the tenth day of the following month, report that fact to the director on a card to be provided for such purpose.

The local registrar shall file all burial or removal permits in his record in numerical order, and shall on the tenth day of each month transmit to the South Dakota Military Department, office of Adjutant General, upon blanks supplied by said department, a complete list, together with all required information of all burials of all veterans, registered by him for the preceding month.

The local registrar shall provide and maintain for all burials within his district a card-index, filed alphabetically by name of deceased and under cemetery name, such card-index record to be maintained on 3x5 cards, each bearing the following information: name of cemetery, burial or removal permit number, name of deceased person, date of death, date of burial, veteran or non-veteran, location of burial by cemetery section number, block, lot and grave number, date of filing, and book and page number wherein such permit is recorded. The registrar in maintaining such card-index record, shall use a white or buff colored card for the recording of each non-veteran and a blue or cherry colored card for recording each veteran's burial, for ready reference.

That the registrar shall receive and file as a permanent record,

the plat or map, or copy thereof, of each cemetery within his district as provided in this chapter; that thereafter it shall be the duty of such registrar to regularly mark and designate upon each plat or map, the exact grave-space of all subsequent burials within such cemetery, by using a uniform mark for all burials, a distinguishing and separate mark for the graves of veterans, and by inserting in such grave-space, the burial or removal permit number, assigned to such burial at the time of filing permit.

Section 27.0218 Director to require complete and correct records: no certificates to be altered; permanent records; indexes; determination by State Board of diseases considered infectious, contagious, or communicable, information furnished to registrars. The director shall carefully examine all certificates or reports received monthly from the local registrars, and if any such are incomplete or unsatisfactory he shall require such further information to be supplied as may be necessary to make the report complete and satisfactory.

All physicians, informants, or undertakers, and all persons having knowledge of the facts, shall supply upon a form provided by the director, or upon the original certificate, such information as they may possess regarding any birth or death, upon demand of the director in person, or by mail, or through the local registrar.

No certificate or birth or death after its acceptance for registration by the local registrar, and no other record made in pursuance of this chapter shall be altered or changed in any respect otherwise than by amendment, properly dated, signed, and witnessed.

The director shall arrange, bind, and permanently preserve all certificates in a systematic manner, and shall prepare and maintain a comprehensive and continuous card index of all births, deaths, marriages, divorces, and naturalizations, said index to be arranged alphabetically, in the case of deaths by the names of the decedent, and in the case of births by the names of fathers and mothers, and in the case of marriages, divorces, and naturalizations by the names of the parties, and shall number, index, and bind all certificates and reports in substantial covers and carefully preserve the same.

The State Board of Health shall determine what diseases are to be considered infectious, contagious, or communicable and dangerous to the public health and the director shall inform all registrars which such diseases are to be so considered.

Section 27.0219 Fees: birth or death certificate; reports, burial or removal permits; how paid. Any person making the required report shall be paid the sum of twenty-five cents for each birth certificate, each death certificate and each burial or removal

permit, properly and completely made out and filed with the local registrar, and each local registrar shall be paid the sum of twenty-five cents for each birth certificate, each death certificate, and for each burial or removal permit properly and completely made out and registered with him and correctly recorded and as to such birth and death certificates promptly returned by him to the director. If no births or no deaths were registered during any month, the local registrar shall be entitled to be paid the sum of twenty-five cents for each report to that effect, but only if such reports are made promptly, and twenty-five cents for each report correctly made to South Dakota Military Department, as required by this chapter.

All fees payable under the provisions of this chapter shall be paid by the treasurer of the county in which the registration district is located, upon certificate by the director, who shall annually certify to the auditors of the several counties the number of births, deaths and burials properly registered, with the names of the registrars and the amount due each at the rates herein fixed.

Section 27.0220 Records and copies: fees for; duty of director to furnish; prima facie evidence; search of record, fee; accounting for fees; when no fees charged. The director shall upon request supply to any applicant a certified copy of the record of any birth, death, marriage, divorce, or naturalization registered under the provisions of this chapter, for the making and certification of which he shall be entitled to a fee of one dollar, to be paid by the applicant. Any such record or a certified copy thereof shall be prima facie evidence in all of the courts of this state of the facts therein stated. The director shall be entitled to a fee of fifty cents for each hour or fractional part of an hour of time spent in searching the files and records when any certified copy is made, said fee to be paid by the applicant.

The director shall upon request of any parent or guardian supply without fee a certificate limited to a statement as to the birth of any child, when the same shall be necessary for admission to school or for the purposes of securing employment. The United States Census Bureau may obtain, without expense to the state, transcripts or certified copies of births and deaths without the payment of fees herein prescribed, and no charge shall be made for certified copies of birth, death, marriage, or divorce records when requested or required in pension claims of widows or soldiers of the Civil or Spanish-American Wars, or any compensation or insurance claims of widows or soldiers of the World War, or any compensation or insurance claims of widows, orphans, or other dependents from any agency of the United States.

The director shall keep a true and correct account of all fees

received by him under the provisions of this chapter and shall pay the same over to the State Treasurer.

Section 27.0221 Enforcement of vital statistics regulations: duty of local registrar; supervision of director; report of infractions. The provisions of this chapter shall be enforced by the local registrar in each registration district under the supervision and direction of the director, such local registrar to make an immediate report to the director of any violation of this chapter coming to his knowledge.

Section 27.0222 Enforcement: general supervision and control of director; duties of state's attorneys and Attorney General. The provisions of this chapter shall be performed and enforced in every part of this state by the director who shall have supervisory power over local registrars, deputy local registrars, and subregistrars, to the end that all requirements of this chapter shall be uniformly complied with. The director either personally or by accredited representative shall have authority to investigate any irregularities or violations of law, and all registrars shall aid him upon request in such investigations. When the director shall deem it necessary he shall report all cases of violation of any of the provisions of this chapter to the state's attorney of the county where the violation occurred with a statement of all the facts and circumstances, and when any such case is so reported to such state's attorney he shall forthwith initiate and promptly carry on the necessary court proceedings against the person or corporation responsible for the alleged violation. Upon request of the director the Attorney General shall assist in the enforcement of the provisions of this chapter.

## CHAPTER 168

**(Session Laws of 1939)**

### **ADOPTION**

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Section 10. Adoptions; approval by State Department. Upon the filing of a petition for the adoption of a minor child the court shall notify the Division of Child Welfare of the State Department of Social Security by mailing to the Division a copy of the said petition and shall notify the Division of the date fixed for hearing said petition, or mail to the Division a copy of the order fixing the date of such hearing. It shall then be the duty of the Division to approve the report of the child welfare agency showing whether the proposed foster home is a suitable home for the child, why the parent or parents wish to give up the child, and whether the child is suitable for adoption. The Division shall make recommendation as to the desirability of the adoption. The Division may appear in any such procedure the same as the party in interest, and may request a postponement of hearing on the petition in event more time is needed for its investigation.

Section 11. Confidential nature of adoption records. The files and records of the court in adoption proceedings shall not be open to inspection or copy by other persons than the parents by adoption and their attorneys, representatives of the Division of Child Welfare of the State Department of Social Security and the child when he reaches maturity, except upon order of the court expressly permitting inspection or copy. No person having charge of any birth or adoption records shall disclose the names of any such parents, or parents by adoption, or any other matter, appearing in such records, or furnish certified copies of any such records, except upon order of the county court in the county in which the adoption took place or other court of competent jurisdiction.

Section 12. Birth certificates of adopted children. On being advised by the Clerk of Courts, pursuant to law, of the adoption of any child whose birth shall previously have been registered, the division of Vital Statistics of the State Board of Health shall cause to be made a new record of the birth in the new name and with the name or names of the adopting parent or parents, which shall be used for all future issuance of certificates of birth. The original certificate of birth with the decree of the court as to the adoption shall be sealed and shall remain a part of the records of the Division of Vital Statistics and shall be opened only upon the demand of said child when he reaches maturity, or his adopting parents, or by the order of a court of competent jurisdiction.

## CHAPTER 27.03

### PHYSICIANS: EXAMINATIONS; LICENSE

Section 27.0301 Application for license: citizenship, residence and educational qualifications; discretion of State Board of Health. Any person desiring to engage in the practice of medicine, surgery, or obstetrics in any of their branches in this state shall make application to the State Board of Health for a license.

Such license shall be granted to any applicant who shall give satisfactory proof of being at least twenty-one years of age, of good moral character, a citizen of the United States or a person who has declared his intention to become a citizen and upon compliance with the following conditions: the applicant shall pass an examination in the following subjects: anatomy, physiology, chemistry, pathology, therapeutics, practice of medicine, surgery, obstetrics, gynecology, diseases of the eye and ear, nose and throat, bacteriology, medical jurisprudence and such other branches as the Board may deem advisable, and in addition thereto shall present evidence of having attended a legally organized and reputable medical college recognized and approved by such Board, and of having received a diploma from such medical college which shall be in good standing, to be determined by the Board, and such diploma must be submitted to the Board for inspection and verification. Such applicant must also present evidence satisfactory to the Board that he has served as interne in a thoroughly equipped standard hospital for such time as the Board may by regulation legally provide. Such Board may in its discretion accept such active practice or other experience for a certain period of time or of a certain character in lieu of interne service as the Board may determine.

Section 27.0302 Examination for physician's license: method; grades required; fee for. The examination required by the preceding section may be in writing or oral, or both, as the Board may determine. The questions on all subjects, except therapeutics and practice of medicine, shall be such as are answered alike by all schools of medicine. No license shall be refused any applicant because of his adherence to any particular school of medicine. Each applicant shall be required to attain an average percentage of at least seventy-five per cent of correct answers. Any applicant failing on such examination shall be eligible to a second examination at any regular meeting of the Board, or at such time as the Board may designate, without the payment of an additional fee. Before taking the examination each applicant shall pay to the Superintendent a fee of twenty dollars.

Section 27.0303 License granted: majority of Board must concur; record of examination preserved. To each applicant successfully passing such examination and fulfilling all other requirements of this chapter the Board shall grant a license to practice medicine, surgery, and obstetrics in all their branches in this state. Such license shall be granted only by the consent of a majority of the Board. All examination papers and questions submitted on examination shall be kept for reference and inspection for a period of not less than three years.

Section 27.0304 License from other state: admission without examination; discretion of State Board of Health; fee. Such Board may in its discretion, without examination, issue a license to any applicant holding a license which shall have been issued to the applicant by the Examining Board of the District of Columbia, or any state or territory of the United States, or the National Board of Medical Examiners, if the legal requirements of such Examining Board at the time of issuing such license or certificate shall be in no degree or particular less than those of this state at the time when such license is presented for registration.

This section shall apply only to certificates or licenses issued by such Examining Boards as accept and register licenses or certificates issued by the State Board of Health of this state.

Each applicant upon making application under the provisions of this chapter shall pay to the Superintendent of such Board a license fee of fifty dollars.

Section 27.0305 Refusal of license: unprofessional, immoral, or dishonorable conduct; discretion of Board. Such Board shall have power to refuse to grant a license under this chapter for unprofessional, immoral, or dishonorable conduct on the part of the applicant.

Section 27.0306 Revocation of license: causes; hearing; notice; appeal. Such Board shall have power to revoke the license of any physician or surgeon heretofore or hereafter granted upon accusation made under oath by a reputable person, if it shall satisfactorily appear to the Board that such physician or surgeon has been guilty of unprofessional, immoral, or dishonorable conduct or has been convicted of a felony, or if such physician or surgeon publicly professes or claims to cure or treat disease, injury, or deformity in such a manner as to deceive the public, or shall be grossly incompetent.

No license shall be revoked except after a hearing before the Board upon notice of not less than ten days, with a copy of the accusation having been duly served upon the accused, and then only upon due proof of the facts alleged in the complaint.

An appeal from the decision of the Board may be taken to the Circuit Court of the county where the person whose license or certificate is canceled resides, in the manner provided by law and the rules of practice and procedure adopted by the Supreme Court.

Section 27.0307 Unprofessional or dishonorable conduct of physician: definition and application of term. The phrase "unprofessional or dishonorable conduct" as used in this chapter shall be construed to include:

- (1) Producing or aiding or abetting a criminal abortion;
- (2) Employing what is known as cappers or steerers;
- (3) Obtaining any fee on the assurance that a manifestly incurable disease can be permanently cured;
- (4) Wilfully betraying a professional secret;
- (5) All advertising of medical business in which untruthful or improbable statements are made or which are calculated to mislead or deceive the public;
- (6) Advertising of any medicine or means whereby the monthly periods of women can be regulated or the menses re-established if suppressed;
- (7) Conviction of any offense involving moral turpitude;
- (8) Habitual intemperance;
- (9) Refusal or neglect to report the existence of a diseased or insanitary condition to the proper health authorities, as prescribed by the regulations of such Board;
- (10) Prescribing intoxicants to any person in quantities, and under circumstances making it apparent to the Board that such prescription was not made for legitimate medicinal purposes;
- (11) Splitting fees or giving to any person furnishing a patient any portion of the fees received from such patient or paying or giving to any person any consideration whatever for furnishing any patient.

Section 27.0308 License recorded: office of register of deeds; duty of physician. Every person receiving a license to practice, as provided in this chapter, shall record the same in the office of the register of deeds of the county where he resides and is engaged in practice and such register of deeds shall, on or before the first day of January and July in each year, furnish to the Superintendent of the State Board of Health a list of all licenses recorded.

Section 27.0309 Itinerant physician: license required; additional license fee; annual renewal required. Any physician prac-

ticing medicine, surgery, or obstetrics or professing or attempting to treat, cure, or heal diseases, ailments or injuries by any medicine, appliance or method, who goes from place to place, or from house to house, or by circulars, letters, or advertisements solicits persons to accept treatment from himself or others at places other than his office at the place of his permanent residence, shall be deemed an itinerant physician and shall, in addition to the ordinary physician's license as provided for in this chapter, procure an itinerant physician's license from the State Board of Health for which he shall pay the Superintendent of such Board the sum of one thousand dollars per annum, upon the payment of which sum such Board shall issue to the applicant therefor a license to practice within the state as an itinerant physician for one year from the date thereof.

Section 27.0310 Unlawful practice: definition; use of medical titles for advertising. Any person who shall append or prefix the letters M.B. or M.D., or the title of Dr. and Doctor, or Specialist, or any other sign or appellation in a medical sense, to his name, or shall profess publicly to be a physician or surgeon, or who shall recommend, prescribe, or direct for the use of any person any drug, medicine, apparatus, or other agency for the cure, relief, or palliation of any ailment or disease of the mind or body, or for the cure or relief of any wound, fracture, or bodily injury or deformity, after having received, or with the intent of receiving therefor, either directly or indirectly, any bonus, gift, or compensation, shall be regarded as practicing within the meaning of this chapter.

Section 27.0311 Army, navy, marine physicians exempted from regulation. The provisions of sections 27.0302 to 27.0308, inclusive and sections 27.0310 and 27.9904 shall not apply to commissioned surgeons of the United States Army, Navy, or Marine Hospital Service, in actual performance of their duties, nor to regularly licensed physicians or surgeons from outside this state in actual consultation with licensed physicians of this state, nor to dentists or osteopaths in the legitimate practice of their professions, nor to Christian Scientists as such who do not practice medicine, surgery, or obstetrics by the use of any material remedies or agencies, nor to resident physicians and surgeons of this state regularly licensed and practicing in this state at the time of the taking effect of this Code: and a regularly licensed chiropractor may prefix the title of "Dr." or "Doctor" to his name.

Section 27.0312 License fees: refund; authority of State Board of Health. The State Board of Health shall be authorized to return the examination fee in any case where the applicant has

withdrawn his application prior to the date fixed for his examination, or where the Board for any reason fails to examine an applicant through no fault on his part, but this section shall not apply where a license has been revoked. Any person entitled to have an examination fee so refunded shall present his claim and voucher to the State Board of Health which shall approve the same, the State Auditor shall issue his warrant thereon, and the State Treasurer shall pay the amount thereof from any funds available to such Board.

Section 27.0313 Fees and funds: disposition; records. All money received by such Board shall be paid into the State Treasury and shall be credited to the general fund of the state, and a receipt in duplicate shall be filed by the Superintendent of such Board in the office of the State Auditor.

## CHAPTER 104

(Session Laws of 1939)

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### BASIC SCIENCE LAW

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Section 1. Definitions. (a) Wherever the term "basic science" is used in this act, but not otherwise specifically defined, the same shall be understood and construed to mean and include anatomy, physiology, bacteriology, pathology and chemistry, so far as same relates to the human system or mind as generally treated in each or all of said subjects.

((b) Whenever the term "healing art", "healing", "art of healing", "practicing healing", "practice of healing", is used in this act, unless otherwise specifically defined, it shall be construed and understood to mean and include any system, treatment, operation, diagnosis, prescription, or practice for the ascertainment, cure, relief, palliation, adjustment, or correction of any human disease, ailment, deformity, injury, unhealthy or abnormal physical or mental condition.

(c) Whenever the term "board of examiners", or "board" is used in this act and not otherwise specifically defined, the same shall be understood and construed to mean the board of basic science examiners created by this Act.

Section 2. Exceptions. This act shall not be construed as applying to Christian Scientists, dentists, pharmacists, nurses, optometrists, chiropodists, dental hygienists, hydrotherapists, barbers, and cosmetologists, practicing within the limits of their respective callings; nor to commissioned surgeons of the United States army, navy, marine or public health service, in the usual performance of their duties; nor to regularly licensed physicians or surgeons from outside this state in actual consultation with licensed physicians of this state; nor to those giving baths, Swedish movements and exercises, or physical culture treatments; nor to retail dealers fitting and recommending arch supports or orthopedic shoes; nor to persons who are not by law required to have a license for the practice of their profession or calling. This act shall not apply to students regularly registered, enrolled and in attendance as of March 15, 1939, in schools of medicine recognized and approved by the State Board of Health, in schools of osteopathy recognized and approved by the National Osteopathic Association, in schools of chiropractic recognized and approved by the State Board of Chiropractic Examiners.

Section 3. Basic Science Certificate Required. No examining board for any branch or system of healing shall admit to its examinations or register or license any applicant to such board, except as otherwise provided by this act, unless such applicant shall first present to said board a certificate of eligibility issued under the provisions of this act.

Section 4. Board of Examiners. The Governor of this state, within forty days after this act takes effect, shall appoint a state board of examiners in the basic sciences consisting of five members. The members of said board shall consist of one Doctor of Medicine, one Doctor of Osteopathy, one Doctor of Chiropractic, hereinafter referred to as professional members, all of whom are residents of this state licensed to practice their respective professions therein, and two residents of this state who are full time professors or associate or assistant professors teaching the subjects of the basic sciences in any university or college in this state accredited by the North Central Association of Secondary Schools and Colleges, hereinafter referred to as lay members, who are not actively engaged in the practice of the healing arts, or any branch thereof, nor hold a degree in any of the healing arts.

The members of said board shall be appointed one for one year, two for two years, and two for three years from the date this act takes effect.

On the expiration of the term of any professional member, the Governor shall fill the vacancy by appointment for a term of three years from the profession to which the member belongs whose term expires. On the death, resignation or removal of any professional member the Governor shall fill the vacancy by appointment from the profession to which the member belongs whose term of office becomes so vacant.

Appointments of lay members to such board shall be made by the Governor as follows: One of such lay members shall be appointed from a list of two or more qualified appointees recommended by the governing board of the South Dakota Osteopathic Association and one or more of whom shall be recommended by the governing board of the South Dakota Chiropractic Association. On the death, resignation, removal or expiration of the term of any lay member recommended by the governing board of such medical association, the Governor shall fill the vacancy by appointment from a list of two or more qualified appointees recommended by the governing board of such Medical Association; and upon the death, resignation, removal or expiration of the terms of a lay member recommended by the governing board of such Osteopathic Association or the governing board of such Chiropractic Association, such vacancy shall be filled by the Governor from a list of

two or more qualified appointees, one or more of whom are recommended by the governing board of such Osteopathic Association and one or more of whom are recommended by the governing board of such Chiropractic Association.

The lists of recommended appointees herein required shall be furnished the Governor at least thirty days prior to the expiration of any term, and in cases of vacancies within thirty days after the occurrence of such vacancy. All appointments to fill vacancies shall be for the unexpired portion of the term.

It is the intent of this act that the said board of examiners shall at all times consist of one licensed Doctor of Medicine, one licensed Doctor of Osteopathy, one licensed Doctor of Chiropractic, and two lay members selected from lists of recommended appointees furnished as herein provided.

Every member shall serve until his successor is appointed and qualified. Each member shall qualify by taking and filing with the secretary of state the constitutional oath of office.

Section 5. Organization of Board. The members of said board shall within thirty days after their appointment, meet and elect a president and a vice president from their own number, and elect or appoint a secretary-treasurer, who need not be one of their number, each of whom shall hold their respective offices for one year and until their successors are elected and qualified. Any member of the board and the secretary-treasurer shall have power to administer oaths.

The secretary-treasurer shall give a bond in such sum as must be fixed by the board, with sufficient sureties to be approved by the Board, for the faithful discharge of his duties.

A majority of the Board shall constitute a quorum for the transaction of business. The board shall keep a record of its proceedings, and a register of all applicants for license, which register shall show whether the applicant was rejected or a certificate granted. All examination papers and questions submitted on an examination shall be kept for reference and inspection for a period of not less than two years. The books and register of the board shall be public records and shall be prima facie evidence of all matters recorded therein. The board shall have a common seal and shall formulate rules and regulations to carry out the provisions of this act.

Each member shall receive ten dollars per diem and actual expenses, when actively engaged in the discharge of his duties. The board may determine the compensation of the secretary-treasurer and of such other assistants as may be necessary to carry out the provisions of this act, and may incur such other expenses as may be necessary.

The compensation of the members and other expenses of the board shall be paid out of the fees received from applicants. The office of the board shall be in the state capitol and quarters for that office shall be assigned in the capitol building or some other building occupied by the state government.

The board shall meet at such times and places as shall be designated by the board, and shall conduct at least two examinations in the basic sciences each year, such examinations to be held and conducted at such times and places as it deems best, having due regard to the times and places of the examination held by the several examining boards, authorized to issue licenses to practice any of the branches of the healing art.

Section 6. Examination and Fees—Reciprocity. Any person desiring to practice healing in this state, except as otherwise provided in this act, shall make application to the board of examiners in the basic sciences for a certificate of eligibility to take the examinations therein, such application to be accompanied by a fee to be fixed by the board, not to exceed fifteen dollars. The state board shall issue such certificate upon the following conditions, viz:

Each applicant shall submit evidence, satisfactory to the board.

- (1) That he is of good moral character,
- (2) That he is not less than twenty-one years old,
- (3) That he is a citizen of the United States, or has declared his intention to become such,

(4) That he possesses a high school education, or its equivalent, and

(5) In addition, shall pass an examination before the board and to its satisfaction, in the basic sciences, with a credit of not less than seventy-five per centum in each subject. The standards of proficiency established by the board shall not exceed those required for final passage in the basic sciences as taught in any college or university in this state accredited by the North Central Association of Secondary Schools and Colleges for the year in which the applicant shall have matriculated in a school or college of the healing arts; provided, that the board may in its discretion, waive the examination herein required when proof satisfactory to the board is submitted showing

(a) That the applicant has passed an examination in the basic sciences in another state of the United States, before a board of examiners in the basic sciences;

(b) That the requirements of that state at the time of such examination are not less than those required by this state as a condition precedent to the issue of the certificate;

(c) That like exemption from examination in the basic sciences is granted by such states to holders of certificates of eligibility issued under the provisions of this act, and

(d) The certificate is accompanied by a fee of twenty-five dollars.

The fee for endorsement of a certificate issued under this act to another state shall be five dollars.

The certificate of eligibility issued under this act shall be signed by the president and the secretary-treasurer of the board, under the seal of the board.

If the applicant shall fail in one or two subjects only, he may be examined in the subject or subjects in which he failed at any examination within one year without payment of an additional fee; provided, that he shall file an application with the board in accordance with its rules and regulations.

If the applicant shall fail in three or more subjects, he shall file an application with the board for examination in all subjects, and shall show proof satisfactory to the board of additional study in the basic sciences; and such application shall be accompanied by the fee required for an original examination.

Section 7. Appeals. Any person aggrieved by any action of the board may appeal to the Circuit Court of any county in this state, such appeal to be taken in the manner provided by law and the rules of practice and procedure adopted by the Supreme Court governing appeals from boards and commissions.

Section 8. Certificates and Licenses Void. Any basic science certificate of eligibility and any license to practice the healing arts or any branch thereof, issued contrary to this act, is void. Any licensing board which has issued a license on the basis of a void basic science eligibility certificate shall revoke or cancel that license. The certificate of eligibility issued to any person by a board of examiners in the basic sciences, shall be revoked automatically by the revocation of his licenses to practice the healing art or any branch thereof.

Section 9. Present Licensees Exempt. This act shall not apply to any person legally registered and licensed to practice the healing arts, or any branch thereof, in this state on the effective date of this act, provided, that such license shall on or before October 1, 1939, apply to the board of examiners for a certificate of eligibility, accompanying such application with sufficient and satisfactory evidence that he was, on the date this act takes effect, lawfully authorized to practice in this state any of the healing arts, or regularly licensed or registered in this state according to

law, in the particular branch or system of healing by him pursued, together with a fee of three dollars.

Such certificate of eligibility shall recite that registration is made solely as a person lawfully authorized to practice healing, or licensed or registered according to law on the date this act takes effect, and that the same was issued without examination in the basic sciences.

Any person entitled to a certificate of eligibility in the basic sciences without examination therein, pursuant to the provisions of this section, who fails to apply for the same in the manner herein provided, shall not receive such certificate of eligibility except upon an application for examination in the basic sciences as hereinbefore provided; provided, however, that the board of examiners may after the first day of October, 1939, in its discretion, on payment to it of a fee to be fixed by said board, not exceeding twenty-five dollars, issue a certificate of registration in the basic sciences without examination, to any person who would have been entitled thereto pursuant to the provisions of this section upon applying therefor on or before the first day of October, 1939, and who makes proper application therefor and shows good cause why said application was not made on or before the first day of October, 1939.

Section 10. Certificate Recorded. Every person receiving a certificate of eligibility as provided in this act shall record the same in the office of the register of deeds of the county where he resides and is engaged in practice.

Section 11. No Discrimination by Board. The board of examiners of the basic sciences shall in no manner discriminate against any system or branch of healing. No applicant shall be required to disclose the professional school he may have attended, or what system of the healing art he intends to pursue. The examination papers shall not disclose the name of any applicant, but shall be identified by numbers to be assigned by the Secretary-treasurer of the board.

Section 12. Enforcement. The state board of examiners in the basic sciences, and the several boards authorized to issue licenses to practice the healing arts and branches thereof, shall investigate every supposed violation of this act coming within the scope of the authority of such boards respectively, and report to the proper state's attorney all cases that in the judgment of the board warrant prosecution. It shall be the duty of the attorney general and the several state's attorneys to prosecute violations of this act.

Section 13. Additional Qualification. The certificate of eligibility required under the provisions of this act shall be construed

as an additional qualification of applicants for examination, or license, or registration in any of the branches of the healing art, and as a condition precedent thereto. It shall not be construed to in any way be a substitute for, or in lieu of, any of the requirements prescribed by law or by any examining board in any of the branches of the healing art.

Any board authorized to issue licenses to practice the healing art or any branch thereof, may, in its discretion, either accept certificates of eligibility issued by the board of examiners in the basic sciences in lieu of examining the certificants in such sciences or it may examine such certificants in such sciences.

Section 14. Examination Fee Refunded. The board of examiners shall be authorized to return the examination fee in any case where the applicant has withdrawn his application prior to the date fixed for his examination, or where the board, for any reason, fails to examine an applicant through no fault on his part, but this section shall not apply where a license has been revoked.

Section 15. Fraudulent Certificates and Licenses Forbidden; Violation—Penalty. Any person who obtains or attempts to obtain a basic science certificate by dishonest or fraudulent means, or who forges, counterfeits, or fraudulently alters any such certificate, or who obtains or attempts to obtain a license to practice the healing art or any branch thereof from any board or officer authorized to issue such license without, as in this act required, presenting to said board or officer a valid certificate, issued to the applicant by the said board of examiners in the basic sciences, shall be guilty of a misdemeanor and shall be punished by a fine of not more than one hundred dollars, or imprisonment in a county jail for not more than six months, or by both such fine and imprisonment.

Section 16. Practice Without Basic Science Certificate Forbidden; Violation—Penalty. Any person who practices the healing art, or any branch thereof, without having obtained a valid certificate from the said board of examiners in the basic sciences, except as authorized by this act, shall be punished by a fine of not more than one hundred dollars, or imprisonment in a county jail for not more than six months, or by both such fine and imprisonment.

## CHAPTER 27.11

### ELECTRIC BATHS

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Section 27.1101 Who may operate. Any intelligent person of good moral habits who understands the principles of electricity may operate electric baths and batteries for the cure of rheumatism and other diseases benefited by such treatment.

Section 27.1102 License fee. All persons who operate electric baths and batteries for profit as provided in section 27.1101 shall pay a license fee of twenty-five dollars into the State Treasury for a continuous license, and shall also register their names and places of business with the county auditor in the county where they reside.

Section 27.1103 Examination. The State Board of Health shall pass upon the qualifications of such persons as to their knowledge of electricity as applied to the human body. Each person applying for such examination shall pay to the State Board of Health the sum of five dollars for such examination, and such Board shall issue a certificate setting forth such qualifications.

## CHAPTER 27.12 MATERNITY HOMES

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Section 27.1201 Definition: application; exceptions. Whoever keeps for care or treatment within a period of six months, more than one woman during pregnancy, or during or after delivery, except women related by blood or marriage; or has in his or her custody or control at any one time, two or more infants under the age of two years unattended by parents or guardians for the purpose of providing them with care, food, and lodging, except infants related to him or her by blood or marriage, shall be deemed to maintain a maternity home or maternity boarding house, or home for the care of infants, or lying-in hospital. The provisions of this chapter shall not apply to any state institution, children's home, association, or institution having care of children under its control, duly incorporated under the laws of the state of South Dakota.

Section 27.1202 License required. No person shall conduct or maintain a maternity home, or maternity boarding house, or home for the care of infants, or lying-in hospital, without having a license from the State Board of Health.

Section 27.1203 State Board of Health issues license: notifies local board of health; inspection of maternity homes authorized; fee for license. The State Board of Health may grant licenses to maintain maternity homes, or maternity boarding houses, or homes for the care of infants, or lying-in hospitals. A record thereof shall be kept in the office of the State Board of Health and a notice shall be given to the local board of health of the city or town in which the licensee resides, of the granting of such license and of the terms thereof. Such license shall terminate on December thirty-first following its issuance and shall state the name of the licensee, the particular premises in which the business may be carried on, the number of women or infants that may be boarded, cared for, treated, or maintained there at any one time.

It shall be the duty of the local board of health of the city or town in which such maternity home, or maternity boarding house, or home for the care of infants, or lying-in hospital, is located to visit said premises at any time and as often as may be deemed necessary, and to inspect the same, and the State Board of Health shall have authority to inspect such maternity homes, or maternity boarding houses, or homes for the care of infants, or lying-in hospitals, or may designate any person or persons to visit or inspect the premises so licensed, and may require if deemed desirable, that the license shall be kept posted in a conspicuous place on the licensed premises.

A fee of one dollar shall be paid to the State Board of Health prior to the issuance of such license.

Section 27.1204 Capacity of homes limited: license designates. No greater number of women and infants shall be kept at any one time on such premises than is authorized by the license, and no women or children shall be kept in a building or place not designated in the license.

Section 27.1205 Revocation of license: causes; notice; appeal. The State Board of Health may revoke such license when a provision of this chapter is violated, or when in the opinion of the Board, such maternity home, or maternity boarding house, or home for the care of infants, or lying-in hospital, is maintained without due regard to the health, comfort, or morality of the inmates thereof, or without due regard to sanitation and hygiene.

When the license is revoked, written notice shall be served by the State Board of Health upon the licensee, either in person or by leaving such notice on the licensed premises. At the same time notice of revocation shall be given to the local board of health of the city or town in which the licensee is located.

An appeal from the decision of the Board may be taken to the Circuit Court of the county in which the person whose license is revoked or suspended resides, in the manner provided by law and the rules of practice and procedure adopted by the Supreme Court.

Section 27.1206 Births: physician required; record preserved. A birth which takes place in a maternity home, or maternity boarding house, or home for the care of infants, or lying-in hospital, shall be attended by a legally qualified physician. A person holding a license shall keep a record in form to be prescribed by the State Board of Health, wherein the licensee shall enter the names and addresses of physicians attending at births taking place in such maternity home or hospital, or attending any sick infant, and the name, age, and sex of children born on the premises or brought thereto.

## CHAPTER 27.13

### DEAD BODIES: CUSTODY AND CONTROL

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Section 27.1301 Disposal of bodies and parts thereof: right of person to direct disposal of own body; application of chapter to parts of body. Every person has the right to direct the manner in which his body shall be disposed of after his death, and to direct the manner in which any part of his body which becomes separated therefrom during his lifetime shall be disposed of. The provisions of this chapter do not apply where such person has given directions for the disposal of his body or any part thereof inconsistent with those provisions.

Except in the cases in which the right to dissect a dead body is expressly conferred by law, every dead body of a human being within this state must be decently buried within a reasonable time after the death. Nothing herein shall affect the right to remove from or carry through this state, a dead human body or parts thereof for the purpose of burying the same in another place.

All provisions of this Code requiring burial of a dead body, or punishing interference with, or injuries to a dead body, apply equally to any part of a dead body separated therefrom during lifetime, or by dissection after death, as soon as the lawful purposes of such dissection have been accomplished.

Section 27.1302 Custody of dead body: persons entitled to. The person charged by law with the duty of burying the body of a deceased person is entitled to the custody of such body for the purpose of burying it; except that in the cases in which an inquest is required by law to be held upon a dead body, by a coroner, such coroner is entitled to its custody until such inquest has been completed.

Section 27.1303 Burial: duty of relatives and public; expense of county of residence or county where body is found. The duty of burying the body of a deceased person devolves upon the persons hereinafter specified:

- (1) If the decedent were married the duty of burial devolves upon the husband or wife;
- (2) If the decedent were not married but left any kindred, the duty of burial devolves upon the person or persons in the same degree nearest of kin to the decedent, being of adult age, and within this state and possessed of sufficient means to defray the necessary expenses;

- (3) If the decedent left no husband or wife nor kindred answering the foregoing description, the duty of burial devolves upon the coroner conducting an inquest upon the body of the decedent, if any such inquest is held; if none, the upon the person charged with the support of the poor in the locality in which the death occurs;
- (4) In case the person upon whom the duty of burial is first cast by the foregoing provisions omits to make such burial within a reasonable time, the duty devolves upon the person next specified; and if all omit to act it devolves upon the tenant, or if there is no tenant upon the owner of the premises or master, or if there is no master upon the owner of the vessel in which the death occurs or the body is found; and if all of these omit to act it devolves upon the county of the legal residence of the deceased and if no such residence is known, then upon the county where the body is first found dead, and in all such cases the said county shall have a legal preferred claim against the estate of the decedent for the actual expense incurred.

Section 27.1304 Dissection: when allowed. The right to dissect the dead body of a human being exists in the following cases:

- (1) In the cases authorized by positive enactment of the Legislature of this state;
- (2) Whenever the death occurs under circumstances in which a coroner is authorized by law to hold an inquest upon the body, and a coroner authorizes such dissection for the purposes of the inquest;
- (3) Whenever any spouse or next of kin of a deceased person being charged by law with the duty of burial authorizes such dissection for the purpose of ascertaining the cause of death;
- (4) Whenever the person dying is at the time of death an inmate of any charitable institution supported by the state of South Dakota, and such person is at the time of death under medical treatment by physicians appointed or under supervision of said authority; provided however, that before such dissection is allowed an order shall be made by the superintendent or person having charge of such charitable institution stating that in his opinion such dissection is necessary or advisable for the purpose of obtaining knowledge of the cause of the death of such person or necessary for the treatment of others; and, before such dissection be allowed the consent of the next of kin of said deceased person shall be obtained, unless said deceased person shall have been neglected or abandoned by said kin for a period of not less than six months next preceding the time of death of such person, and when no inquiry for or in regard

to said deceased person shall have been made by the next of kin of said deceased person for a period of six months next preceding the death of such person, such person shall be deemed abandoned for said period:

(5) Whenever a person lawfully gives permission for such disposal of his body after death.

Section 27.1305 Cemeteries or burial places: authorized removals: duty to remove bodies. Whenever a cemetery or other place of burial is lawfully authorized to be removed from one place to another the right and duty to disinter, remove, and re-bury the remains of bodies there lying buried devolves upon the persons named in section 27.1303 in the order in which they are named, and if they all fail to act, then upon the lawful custodians of the place of burial so removed. Every omission of such duty is punishable in the same manner as omissions are made punishable by section 13.1415 to perform the duty of making burial.

The expense of such removal shall be paid by the person for whose benefit or upon whose complaint or petition it was made, before any order for such removal is made, with the right of such person to recover such expense from the estate of the decedent or persons legally chargeable with his burial expense if it appears that such removal was ordered as a matter of legal right instead of for the accommodation of the applicant for such order.

Section 27.1306 Mausoleums, vaults, burial structures: plans approved by State Board of Health; capacity determines. Before any person shall proceed to construct any mausoleum, vault, or other burial structure entirely or partly above ground, capable of containing twenty or more deceased human bodies for permanent interment, such person shall present the plans for such construction to the State Board of Health and if approved by such Board may proceed with the construction of such mausoleum, vault, or structure; and no such structure shall be erected otherwise than in accordance with the plans approved by such Board.

Section 27.1307 Construction requirements of burial structures. All crypts or catacombs, if any be placed in such mausoleum, vault, or other structure, shall be so constructed that all parts thereof may be readily examined by the State Board of Health or any other health officer, and such crypts or catacombs shall be so hermetically sealed after any deceased body or bodies shall have been placed therein, that no offensive or unhealthful odor or effluvia may escape therefrom.

Section 27.1308 Hermetical sealing of burial structures: requirement; expense. Should any person fail to hermetically seal any such crypt or catacomb and by reason of such failure any

offensive odor or effluvia shall arise therefrom, the State Board of Health or any other health officer shall upon complaint of any resident of the township or city where such mausoleum, vault, or other burial structure may be situated, compel the sexton or other person in charge of such burial structure immediately to remove the deceased body or bodies therefrom and properly inter the same at the expense of the person owning such burial structure; and if no such person can be found in the county where the same may be located, such interment shall be at the expense of the county where such burial structure may be situated.

## CHAPTER 27.18

### COUNTY BOARD OF HEALTH

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Section 27.1801 Membership; officers; vacancies. There shall be a county board of health which shall be composed of the State's attorney of the county, who shall be president thereof, and two licensed physicians, residents of the county, appointed by the State Board of Health, one of whom shall be named superintendent and the other vice president of such county board, and whose term of office shall be for two years. In counties where there are no resident physicians, the State Board of Health may provide for such county boards under such rules and regulations as it may deem proper.

Should a vacancy occur in any county board of health from any cause other than the expiration of the time for which a member had been appointed, the Superintendent of the State Board of Health shall, upon proper notification of such vacancy, proceed to appoint a proper person to fill the vacancy.

Section 27.1802 Compensation of board members: payment. The president of the county board of health shall receive no compensation except ten cents for every mile actually and necessarily traveled in the performance of his duties as a member of such Board.

The Superintendent of the county board of health shall receive ten cents for every mile actually and necessarily traveled by the nearest route in the performance of his duties when not the attending physician, which mileage shall be in lieu of all compensation for traveling expenses; the superintendent or the vice president, if he performs the duties of the superintendent, shall receive such other sums as the board of county commissioners may allow. For each investigation, visit, or examination necessarily made under the provisions of the rules and regulations adopted by the State Board of Health and approved by the Attorney General, and when no investigation, visit, or examination has been made by any other member of the county board of health or any deputy appointed under the provisions of this chapter, the superintendent of the county board of health or the vice president, if he performs the duties of the superintendent, shall receive the sum of five dollars.

The superintendent shall also receive the sum of five dollars per month for making the daily reports and keeping the records of his office as required by the rules and regulations of the State Board of Health, and he or the vice president, if he performs the

duties of the superintendent, shall further receive such other sum or sums as he may pay or become liable to pay for medicine, chemicals, drugs, or appliances in carrying out and performing the various duties imposed upon him by law which, together with other expenses, shall be audited by the board of county commissioners and paid as other county expenses.

In counties where the total annual fees and mileage drawn by the superintendent of the county board of health exceeds the sum of two thousand dollars, the board of county commissioners of such counties may in their discretion pay such superintendent a monthly wage or salary, in amount to be fixed and determined by said board of commissioners and in such case such wage or salary shall be paid to and received by said superintendent in lieu of all mileage and fees as herein provided.

Section 27.1803 Meetings of board. The county board of health shall meet at the county seat at such times as the superintendent may designate, notice of the time and place of meeting to be given by him to the other members of the board at least five days prior to the meeting. The president of the county board of health shall preside at the meetings thereof.

Section 27.1804 Records and reports: superintendent as ex-officio secretary; monthly reports to State Board of Health; report of contagious or infectious diseases. The superintendent of the county board of health shall be ex officio secretary of the board of health of his county and shall keep a record of all the proceedings of the board and of his official acts and shall at the end of every month make a full report in writing to the Superintendent of the State Board of Health of the proceedings of the county board and of his official acts, and of the condition of the public health, and whenever any contagious or infectious disease occurs in his county shall immediately report the same to the Superintendent of the State Board of Health.

Section 27.1805 Powers of county board: enforcement; quarantine; sanitary administration; appointment of deputies; sanitary conditions of schoolhouses; orders. Subject to the supervising control of the State Board of Health, the county board of health, within the territorial limits of its county not included in any city having its own board of health, shall have power.

- (1) To enforce any and all needful rules and regulations made by the State Board for the prevention and cure, and to prevent the spread of contagious diseases;
- (2) To establish quarantine and isolate any person afflicted with a contagious or infectious disease;

- (3) To remove or cause to be removed any dead, decaying, or putrid body, or any decayed, putrid, or other substance that may endanger the health of persons or domestic animals;
- (4) To appoint all duly licensed physicians within the county deputies with power to quarantine any and all cases of infectious, contagious, or communicable diseases, subject to quarantine pursuant to the rules and regulations of the State Board. For all services rendered in quarantining, such deputies shall be entitled to the sum of one dollar for each premise so quarantined. The county board shall also have power to delegate to any person or physician within the county authority to release any quarantine, under the supervision of such county board, to fumigate premises, and to do any and all other things that may be necessary to protect the health of the public;
- (5) In addition to the above powers it shall have original power to inquire into sanitary conditions of school houses within the county, and upon complaint and investigation shall have power to abate any insanitary conditions that may be found to exist. When upon investigation such county board of health shall find any schoolhouse in such an insanitary condition that it is detrimental to the health of the children attending school therein, it shall immediately summon the school board of any such district to a hearing thereon and require the school board to abate the condition complained of. The order so made shall be in writing and a copy of such order placed on file in the office of the secretary of such board. Any order so made shall be enforceable in the same manner as are other orders made by such board with the same rights of appeal to the Circuit Court.

Section 27.1806 Superintendent of county board: powers and duties. The superintendent of the county board of health shall have charge of and superintend, subject to the approval of the board of which he is a member and the supervisory control of the State Board of Health, all the matters and things specified in this chapter and, in case of immediate danger to the health of persons, he may act as in his judgment he may deem proper without consultation with the county board, for the prevention of such danger, and shall immediately report such action to the president of the county board and to the Superintendent of the State Board.

Section 27.1807 Members, officers, and employees: state and local boards; individual rights of entry and inspection; duty of county boards and officers to make investigations and enforce regulations at request of State Board. All members, officers, and employees of the state and local boards of health shall have the right

to enter any building, conveyance, or place where contagion, infection, filth, or other source or cause of preventable disease exists or is reasonably suspected to exist, and all county boards of health and health officers shall make such investigations and reports and obey such directions concerning communicable diseases as the State Board may require or give, and under the general supervision of the State Board they shall cause all laws and regulations relating to public health and sanitary matters to be obeyed and enforced, and every member or officer refusing or neglecting to perform any duty imposed upon him by or pursuant to this chapter or by any statute, ordinance, by-law, or rule or regulation relating to public health and sanitary measures shall be punished according to the provisions of section 27.9934.

Section 27.1808 Pesthouses: counties or municipalities; establishment; administration. Any municipal corporation of the first or second class or the county commissioners of any county, upon application therefor by their respective boards of health, may authorize by ordinance or resolution the establishing of a pesthouse or detention hospital, the purchase of necessary grounds therefor, and the erection of the necessary buildings thereon. Such grounds may be located within or without the limits of any such municipal corporation.

Whenever, by order of any such board of health, any person shall be confined in any such pesthouse or detention hospital, the necessary expenses incurred by said board of health for medical attention, nursing, and subsistence shall be paid by the city or county isolating such person therein, unless such person shall be a legal resident of some other county in this state, in which case the county of his or her legal residence shall be liable therefor.

Section 27.1809 Quarantine: neglect of duty by officer; unlawful. It shall be unlawful for any superintendent or vice president of the county board of health, or any deputy appointed under the provisions of this chapter to refuse, neglect, or fail to quarantine any and all cases of infectious, contagious, or communicable disease subject to quarantine, pursuant to the rules and regulations of the State Board of Health, when he shall have actual notice thereof.



## CHAPTER 27.20

### COUNTY NURSE

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Section 27.2001 County board of health applies for employment. Whenever in the opinion of the county board of health of any county in this state it is necessary for the protection and preservation of the public health to secure the aid and service of a trained nurse or nurses at the expense of the county, said board of health shall file with the county auditor of such county a written application for the employment of a trained nurse or nurses and a statement of the facts and conditions in regard to the public health upon which said application is based and such recommendations as to the term of employment and the compensation to be paid by the county as they may deem proper, and if in their judgment an emergency exists, a demand that the board of county commissioners be forthwith called to meet in special session to act thereon.

Section 27.2002 Freeholders may petition for appointment. In counties where there is no board of health and in counties where the county board of health fails, neglects, or refuses to act in such matters, twenty-five resident freeholders who are electors of such county may petition the board of county commissioners to secure the aid and services of a trained nurse or nurses at the expense of the county, and if in their judgment an emergency exists, a demand that the board of county commissioners be forthwith called to meet in special session to act thereon. The board of county commissioners in considering such petition shall give to it the same force and effect as though made by the county board of health.

Section 27.2003 County commissioners act on application or petition: may employ nurse; compensation; designation as "county nurse"; qualifications; uniform. Upon the filing of such application by the board of health or such petition the county auditor shall forthwith call the county commissioners together in special session providing such demand is made for a special session of the board of county commissioners, the county auditor shall forthwith notify the county commissioners of the filing of such application or petition, as the case may be, and it shall be the duty of the county commissioners at their next regular meeting thereafter to examine and consider the same.

If sufficient grounds are set forth in such application or petition for such employment, the county commissioners may forthwith employ a trained nurse or nurses in accordance with the

recommendations contained in such application or petition and shall fix the term of such employment and the compensation therefor, which compensation may be paid in whole or in part by the Red Cross Seal Commission of South Dakota, or other organization, or by any city or town of such county and the remainder or all of such compensation together with the cost of transportation of such nurse or nurses within such county shall be paid out of the general fund of such county, unless the commissioners shall, by resolution, provide for payment from some other fund.

The person so employed shall be known as the "county nurse" and shall possess all of the qualifications now or hereafter required by law for professional, regularly graduated, and registered trained nurses in this state, and when in the discharge of her professional duties, she shall wear in addition to her usual nurses uniform, a badge or brassard bearing the words "County Nurse."

Section 27.2004 County commissioners may employ nurse without application or petition. The board of county commissioners of any county may at any time when in their judgment and discretion the public health and interests of such county will be benefited thereby, take the same action for the employment of a county nurse, as though an application or petition therefor had been previously filed.

Section 27.2005 Duties of county nurse: conforms to rules and directions of state and county boards; physical examinations of school children; confidential reports; rights of visitation and inspection for detection of communicable diseases. The county nurse shall, in conformity with the rules and regulations of the State Board of Health and Medical Examiners, perform such professional services as the county board of health or county commissioners shall deem necessary for the protection and preservation of the public health and to this end the board of health or commissioners may require said nurse:

- (1) To make a physical examination of the eyes, ears, nose, throat, and teeth of any or all pupils enrolled in the public schools of the county, and to forthwith confidentially report to said board of health any cases which in her opinion are cases of tuberculosis, infantile paralysis, diphtheria, smallpox, scarlet fever, measles, chickenpox, or any other contagious, communicable, or other disease disclosed by such examination.
- (2) To visit any private or sectarian school which holds itself out to the public or any part thereof for the education of children and make similar examinations of pupils or inmates therein and report confidentially to the superintendent of the board of health and to the parent, guardian, or legal custodian of such child;

- (3) To visit any person or persons in any hotel, rooming house, or family home afflicted with tuberculosis or other contagious or communicable disease and to assist and direct as to the proper method to prevent the spread of such disease, such visiting in family homes to be with the consent of such person, persons, or family, or upon the written order of the superintendent of the county board of health;
- (4) To visit any pesthouse or house of detention where any person afflicted with contagious disease may be isolated and assist and direct as to the proper care and nursing of such person or persons;
- (5) To act as visiting nurse throughout the county or any portion thereof and in gathering statistics or diffusing information with reference to the protection and preservation of the public health.

Section 27.2006 Additional services for other public bodies or private individuals: county nurse may perform; compensation fixed by and paid to county. When the county nurse is not needed in the general work of the county she may be employed by cities, towns, associations, or private individuals at such rate of compensation as the county commissioners may fix, the same to be paid to the county and placed to the credit of the fund from which the salary of the county nurse is paid.

Section 27.2007 Reports by county nurse: monthly; confidential; filing; form. It shall also be the duty of the county nurse to make a confidential, written report in duplicate showing in full the services rendered during each calendar month and to file one with the State Board of Health and one with the superintendent of the county board of health on or before the fifth day of each succeeding calendar month.

Such report shall be upon blank forms to be furnished by the State Board of Health and to set forth the number of visits made to homes and schools and other visits, if any, and names and residences of persons whom she believes to be afflicted with tuberculosis and other contagious and communicable diseases and such other information as may be required of her and such recommendations as she shall deem advisable.

Section 27.2008 Visitations of county nurse: unlawful to refuse. It shall be unlawful for any person or persons to refuse to receive such county nurse into private homes, schools, or other places when in the discharge of her official duties as such.

## CHAPTER 27.21

### TOWNSHIP BOARD OF HEALTH

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Section 27.2101 Township supervisors constitute board: general powers; supervisory control of county and state boards. The civil township supervisors shall constitute a board of health and within their respective townships shall have and exercise all the powers necessary for the preservation of the public health, subject to the supervisory control of the county and state boards of health.

Section 27.2102 Powers and duties of board: inspections and examinations; rules and regulations. The township board of health may examine into all nuisances, sources of filth, and causes of sickness within the township.

Such board may make such rules or regulations respecting the same as it may judge necessary for the public health and safety of the inhabitants.

Section 27.2103 Publication of rules and regulations. Any rule or regulation referred to in section 27.2102 shall be deemed duly published by one publication in any legal newspaper printed in the township or, if none be printed therein, in any legal newspaper printed in the county or, if none be printed in the county, by posting of such rule or regulation in five public places in the township.

Section 27.2104 Entry and inspection by board: general provision; procedure to enforce. Whenever the township board of health thinks it necessary for the preservation of the health of its inhabitants to enter any building, car, truck, automobile, or vessel in the township for the purpose of examining into and destroying, removing, or preventing any nuisance, source of filth, or cause of sickness, and shall be refused such entry, any member of the board may make complaint under oath to a justice of the peace of his township, stating the facts in the case so far as he has knowledge thereof.

Such justice shall thereupon issue a warrant directed to the sheriff or any constable of the county, commanding him to take sufficient aid and, accompanied by two or more of the board of health, between the hours of sunrise and sunset, to repair to the place where such nuisance, source of filth, or cause of sickness complained of may be and to destroy, remove, or prevent the same under the direction of the members of such board of health.

Section 27.2105 Orders of board: owner or occupant must obey; forfeitures to township for refusal; procedure to enforce. Whenever any nuisance, source of filth, or cause of sickness is found on private property, the board of health shall order the owner or occupant thereof at his own expense to remove the same within twenty-four hours; and if the owner or occupant thereof neglects so to do he shall forfeit a sum not exceeding fifty dollars, to be recovered in the name of and for the use of the township.

Whenever such owner or occupant shall not comply with such order of the board of health, the board may cause the nuisance, source of filth, or cause of sickness to be removed, and all expenses incurred thereby shall be paid by the owner or occupant or by such other person as has caused or permitted the same.

Section 27.2106 Quarantine: rights and duties of board of health; provision for care of quarantined person; expense. When any person coming from abroad, or residing in any civil township in this state, is infected or has lately been infected with small-pox or other contagious or infectious disease dangerous to the public health, the board of health of the township where such sick or infected person is may immediately cause such person to be removed to a separate house, if it can be done without danger to his health, and shall provide for such person, nurses, medical attendance, and other necessities, which shall be a charge in favor of such township against the person so provided for, his parents or guardian, if able to pay the same, otherwise against the county to which he belongs, or the state, if such person be a nonresident of the state.

If such infected person cannot be removed without danger to his health, the board shall make provision as directed in the preceding paragraph for such person in the house where he may be, and in such case it may cause the persons in the neighborhood to be removed, and may take such other measures as it may deem necessary for the safety of the inhabitants.

Section 27.2107 Hospital: board may provide for control of communicable diseases. When a disease dangerous to the public health breaks out in any township the board shall immediately provide such hospital or place of reception for the sick and infected as is judged best for their accommodation and the safety of the inhabitants, which shall be subject to the regulations of the board; and the board may cause any sick or infected person to be removed thereto, unless his condition will not admit of such removal without danger to his health, in which case the house or place where he remains shall be considered as a hospital and with all its inmates subject to the regulations of the board.

**CITY BOARD OF HEALTH**

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Section 45.0202 Power of Cities. In addition to other powers granted, every city shall have power.

1. To appoint a board of health and prescribe its powers and duties subject to the supervision of the State Board of Health.

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**CHAPTER 27.22****VACCINATION**

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Section 27.2201 Force prohibited. It shall be unlawful for any board, physician, or person to compel another by the use of physical force to submit to the operation of vaccination with smallpox or other virus.

Section 27.2202 School attendance authorized upon vaccination. No person shall prevent a child of school age who furnishes a physician's certificate of successful vaccination with smallpox virus, within five years, from attending public school.

## CHAPTER 27.23

### INFANT BLINDNESS

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Section 27.2301 Ophthalmia neonatorum: defined. Any inflammation, swelling, or redness in either one or both of the eyes of any infant, either apart from or together with any unnatural discharge from the eye or eyes of such infant, independent of the nature of the infection, if any, occurring at any time within two weeks after the birth of such infant, shall be known as "ophthalmia neonatorum."

Section 27.2302 Report of symptoms: duty of physicians, nurses, parents, homes, and hospitals; local health officers, cities, towns, or political divisions. It shall be the duty of any physician, surgeon, obstetrician, nurse, parent, manager, or person in charge of any maternity home or hospital of any nature where births occur, or any person or persons attending upon or assisting in any way whatsoever any infant or the mother of any infant at childbirth or at any time within two weeks after childbirth, observing in such infant any symptoms of ophthalmia neonatorum, to report such condition within eight hours thereafter, in writing or by telephone followed by a written report, to the local health officer of the city, town, or other political division within which such infant may be.

Section 27.2303 Advice and information: cases of childbirth; duty of physician, nurse, other attendants. It shall be the duty of any physician, surgeon, obstetrician, nurse, or midwife in attendance on or having charge of a case of childbirth to inform the parents or guardians of the newborn infant as to the possibility of the occurrence of ophthalmia neonatorum, its dangers and possible consequences, and to advise for the prevention of its development, the use of such prophylactic or preventive measures as shall be prescribed for such purpose by the State Board of Health.

Section 27.2304 Prophylactic measures: duty of physician, nurse or other attendant; record made on birth certificate. It shall be the duty of any physician, surgeon, obstetrician, nurse, or midwife in attendance on or having charge of a case of childbirth to use immediately after the birth of the infant for the prevention of ophthalmia neonatorum such prophylactic measures as shall be approved for such purpose by the State Board of Health, unless specifically objected to by the parents or parent or guardian of such infant, and shall record in writing on the birth certificate of such infant the fact that such measures were or were not employed.

Section 27.2305 Local health officers: duty to investigate, report, and advise. It shall be the duty of the local health officer:

- (1) To investigate and report each case of ophthalmia neonatorum reported to him in pursuance of this chapter or brought to his attention as provided for in the rules and regulations of the State Board of Health.
- (2) To advise such treatment of each infant found to be suffering from ophthalmia neonatorum unless such infant is already receiving proper treatment as may be prescribed in such cases by the rules and regulations of the State Board of Health.

Section 27.2306 State Board of Health: duties; rules; information; distribution of preventive materials. It shall be the duty of the State Board of Health:

- (1) To make such rules and regulations as it may deem necessary to carry out properly the provisions hereof;
- (2) To provide for the gratuitous distribution of a scientific prophylactic or preventive of ophthalmia neonatorum, together with proper directions for the use and administration thereof, to all physicians, nurses, and midwives who practice obstetrics or assist at childbirths;
- (3) To furnish copies of this law to all physicians, nurses, and midwives who practice obstetrics or assist at childbirths;
- (4) To keep a record of any and all cases of ophthalmia neonatorum reported to it in pursuance to this chapter.

## CHAPTER 27.24

### VENEREAL DISEASES

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Section 27.2401 Specification of communicable venereal diseases; exposure unlawful. Syphilis, gonorrhea, and chancroid hereinafter designated as venereal diseases are hereby declared to be contagious, infectious, communicable, and dangerous to the public health. It shall be unlawful for any one infected with these diseases or any of them to expose another person to infection.

Section 27.2402 Report of venereal diseases: duty of physicians or other practitioners, superintendents of hospitals, charitable, or penal institutions. Any physician or other person who makes a diagnosis in or treats a case of venereal disease and any superintendent or manager of a hospital, dispensary, or charitable or penal institution in which there is a case of venereal disease shall make a report of such case to the health authorities in such form and manner as the State Board of Health shall direct.

Section 27.2403 Health officers: state, county, municipal; powers and duties for control and eradication; quarantine. State, county, and municipal health officers or their authorized deputies within their respective jurisdiction are hereby directed and empowered to require persons infected with venereal disease to report for treatment to a reputable physician and continue treatment until cured or to submit to treatment provided at public expense until cured, and also, when in their judgment it is necessary to protect the public health, to isolate or quarantine persons infected with venereal disease.

It shall be the duty of all local and state health officers to investigate sources of infection of venereal disease, to co-operate with the proper officials whose duty it is to enforce laws directed against prostitution, and otherwise to use every proper means for the repression of prostitution.

Any person convicted of being a prostitute or inmate of a disorderly house who may be found to be infected with venereal disease in a stage which, in the opinion of the health officer, is or is apt to become communicable, shall be quarantined or isolated so long as such person is so infected.

Section 27.2404 Prisoner: state, county, or city; examination and treatment required; isolation and quarantine. All persons who shall be imprisoned or confined in any state, county, or city prison in the state shall be examined for and, if infected, treated for venereal diseases by the health authorities or their deputies.

The authorities of any state, county, or city prison are directed to make available to the health authorities such portion of any state, county, or city prison as may be necessary for a clinic or hospital wherein all persons who may be confined or imprisoned in any such prison and who are infected with venereal disease and all such persons who are suffering wth venereal disease at the time of the expiration of their term of imprisonment, and in case no other suitable place for isolation or quarantine is available, such other persons as may be isolated or quarantined under the provisions of this chapter shall be isolated and treated at public expense until cured. In lieu of such isolaton any of such persons may in the discretion of the State Board of Health be required to report for treatment to a licensed physician or submit to treat-  
ment provided at public expense.

Nothing herein contained shall be construed to interfere with the service of any sentence imposed by a court as a punishment for the commission of crime.

Section 27.2405 Rules and regulations: authority of State Board; rules binding on local health officers. The State Board of Health is hereby empowered and directed to make such rules and regulations as shall in its judgment be necessary for the carrying out of the provisions of this chapter, including rules and regulations provided for the control and treatment of persons isolated or quarantined under the provisions of this chapter and such other rules and regulations not in conflict with the provisions of this chapter concerning the control of venereal diseases and concerning the care, treatment, and quarantine of persons infected therewith, as it may from time to time deem advisable.

All such rules and regulations so made shall be of force and binding upon all county and municipal health officers and other persons affected by this chapter.

## CHAPTER 103

(Session Laws of 1939)

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### REQUIRING PREGNANT WOMEN TO HAVE BLOOD TEST

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Section 1. That Chapter 27.24 of the South Dakota Code of 1939, is hereby amended by adding immediately after section 27.2405, the following section:

27.2406 Pregnant women: blood test to be made. (1) Each physician attending a pregnant woman in this state during gestation shall, in the case of each woman so attended, take or cause to be taken a sample of blood of such woman at the time of the first examination, and submit such sample for standard serological tests for syphilis to the state health laboratory of the state board of health or such other laboratories cooperating with and approved by the state board of health. Every other person permitted by law to attend upon pregnant women in the state but not permitted by law to take blood tests, shall cause a sample of the blood of such pregnant woman to be taken by a duly licensed physician and submitted for standard serological tests for syphilis to the state hygienic laboratory of the state board of health or such other laboratories cooperating with and approved by the state board of health. Such tests as may be made by the state health laboratory of the state board of health shall be free of charge. The result of all laboratory tests shall be reported on standard forms prescribed and furnished by the state board of health.

(2) In reporting every birth and stillbirth, physicians and others permitted to attend pregnancy cases and required to report births and stillbirths shall state on the birth certificate or stillbirth certificate, as the case may be, whether a blood test for syphilis has been made during such pregnancy upon a specimen of blood taken from the woman who bore the child for which a birth or stillbirth certificate is filed, and if made, the date when such test was made, and if not made, the reason why such test was not made. In no event shall the birth certificate state the result of the test.

## CHAPTER 36

(Session Laws of 1939)

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### BLOOD TEST BEFORE MARRIAGE; LAW AMENDED

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Section 1. That Title 14, Chapter 14.01 of the South Dakota Code of 1939 be, and the same is hereby amended by adding thereto immediately after Section 14.0122, the following section:

14.0123 Marriage License: physical examination required before issuance. (1) In addition to the requirements for a marriage license as set out in this chapter, all persons making application for license to marry shall at any time within twenty (20) days prior to such application, be examined by a duly licensed physician as to the existence of or freedom from syphilis, and it shall be unlawful for the Clerk of the Circuit Court of any county in this state to issue a license to marry, except as otherwise provided in this act, to any person who fails to present for filing with such clerk a certificate signed by such physician setting forth that said person to the proposed marriage is either free from syphilis or not in a stage of the disease whereby it may become communicable as nearly as can be determined by a thorough physical examination and such standard microscopic and serological tests as are necessary for the discovery of syphilis.

(2) If, on the basis of negative laboratory and clinical findings the physician in attendance finds that the examinee is either free from syphilis or not in a stage of the disease whereby it may become communicable, as nearly as can be so determined, he shall issue a certificate to the examinee to that effect on a form prescribed and furnished by the State Board of Health. Such certificate of negative findings as to each of the parties to a proposed marriage shall be filed with the clerk of the Circuit Court of the County wherein the marriage is to be solemnized, at the time application for a license to marry is made.

(3) All standard serological tests for syphilis as required under this act shall be made by the State Health Laboratory of the South Dakota State Board of Health or by such other laboratories which are approved by the State Board of Health. Such tests as may be made by the State Health laboratory of the State Board of Health shall be free of charge. The results of all laboratory tests shall be reported on standard forms prescribed and furnished by the State Board of Health.

(4) Irrespective of the laboratory test results and clinical

examination findings, the clerk of the Circuit Court shall issue a marriage license to parties to a proposed marriage when the woman is pregnant at the time of application, and in lieu of the health certificate required under this act such clerk of the Circuit Court is hereby authorized to accept an affidavit on a form prescribed and furnished by the State Board of Health, signed by a licensed physician stating that the woman is pregnant.

(5) Nothing in this act shall impair or affect existing laws or rules or regulations heretofore and hereafter made by authority of law relative to the reporting of cases of venereal disease discovered by physicians in the course of their practice.

(6) Any Clerk of the Circuit Court who shall unlawfully issue a license to marry to any person who fails to present and file the certificate or affidavit as required in this act, and any person or persons who shall disclose or falsify any matter relating or pertaining to the examination of or certificate about any applicant for license to marry or clinical and laboratory tests taken by any person to a proposed marriage, except as may be required by law, and any person who shall obtain a license to marry contrary to the provisions of this act, shall be guilty of a misdemeanor and upon conviction thereof shall be punished as provided by the laws of this state.

(7) Marriage licenses issued under the provisions of this act shall become void and of no effect unless the marriage be solemnized within twenty (20) days following the issuance thereof.

## CHAPTER 105

(Session Laws of 1939)

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### AUTHORIZING MUNICIPAL CORPORATIONS TO REGULATE PUBLIC EATING AND DRINKING PLACES

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Section 1. Any Municipal Corporation in this State may adopt an Ordinance providing for the examination of any person or persons owning or operating, or of any employee or employees employed therein, who conduct or operate a public eating or drinking place where drink or food is provided or offered for sale, or for any retail or wholesale place of business where food or food-stuffs or drinkable products are prepared or offered for sale to the public.

Section 2. Such Ordinance shall provide for the examination of such employer or employee employed as provided in Section 1 hereof, and for failure to secure such examination and a health certificate said Ordinance may provide penalties therefor.

Section 3. All acts or parts of acts in conflict herewith are hereby expressly repealed.

## CHAPTER 106

(Session Laws of 1939)

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### RELATING TO USE OF PUBLIC FUNDS FOR PAYMENT OF DOCTORS

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Section 1. That hereafter all funds appropriated by the State of South Dakota or otherwise established by the State, or from any other source whatever as a public fund, to be distributed or allotted for any Public Health Program, financed in whole or in part by such public funds or administered or supervised by any public agency controlled by the State or any corporation or association organized under the laws of the State for the Administration of such funds; shall when administered or distributed in payment of services rendered by physicians or licensed practitioners of the healing arts under the provisions of such public health program be so administered or distributed that there shall be no restrictions in the right of any client or citizen to select any regularly licensed physician or practitioners of the healing arts of his choice for the performance of services under such program, provided that this Act shall in no way affect the provisions of Section 27.0104 of Chapter 27.01 of the South Dakota Code of 1939, relating to the powers and duties of the State Board of Health as provided in subdivision 4 of Section 27.0104 of the South Dakota Code of 1939, relating to the services for crippled children.

Section 2. That any violation of this act shall be a misdemeanor.

## CHAPTER 27.25

### DEAD ANIMAL CONTROL

Section 27.2501 Township Supervisors: duty to require disposal of dead animals. Whenever it shall be brought to the knowledge of any member of the board of township supervisors that the dead, putrid or decaying body of any animal is unburied in his township and is or may become offensive or endangers or may endanger the health of persons or domestic animals, such supervisors shall forthwith notify the person who was at the time of its death the owner of such animal and also the person who has at such time in charge thereof, if known to him and residing in the township, to burn or bury such body or otherwise dispose of such body in the manner provided by law within a reasonable time to be fixed by the said supervisor.

Section 27.2502 Disposal by township when owner neglects. If the owner or person in charge shall fail, neglect, or refuse to burn or bury or otherwise dispose of such body in accordance with the laws, rules, and regulations provided by this chapter within the time required by such supervisor, or if such persons are unknown to the said supervisor or do not reside in the township, the said supervisor shall at once cause the same to be buried or burned and the expense of the same shall be paid by the township where such animal is found dead.

Section 27.2503 Liability of owner, expense of disposal. The owner of such animal and the person in charge thereof shall at once become liable to the township for the costs and expenses of such burning or burial and notice, and the same may be recovered in an action to be instituted against both or either of such persons

Section 27.2504 County co-operation: duties of superintendent, county board of health; unorganized townships. In any county not wholly organized into civil townships the superintendent of the county board of health shall perform all of the duties of the township supervisor within such unorganized territory in respect to dead, putrid, or decaying bodies of any animals, and all expenses incurred in connection with the burning or burial of such animals or the giving notice shall be paid by the county, and the owner of such animal and the person in charge thereof shall become liable therefor to the county.

Section 27.2505 County co-operation: when owner or township supervisor fails to act; duties; expense; lien. Whenever the owner of a dead animal or the township supervisor fails to act as herein-

before provided within two days after the knowledge of the fact that such dead animal exists, it shall then be the duty of the superintendent of the county board of health to forthwith cause the body of such dead animal to be burned or buried, and the expense of the same shall be paid by the county, and the amount of such expenses paid by the county shall constitute a lien against the township in which said animal was found and shall be paid by such township, and the township shall in turn recover such expenses from the owner or person in charge of such dead animal.

Section 27.2506 Method of disposition. The burning or burial provided for herein shall be done effectively and thoroughly so that the body shall not emit any stench or be offensive or in any manner endanger the health of persons or domestic animals.

Section 27.2507 State's attorney: civil actions to collect: duties. Whenever any such dead body shall be buried or burned by order of the superintendent of the county board of health, such superintendent shall at once inform the state's attorney of the fact of such burning or burial, and the costs and expenses of the same and the giving of notice, together with the names of the owner and person in charge if known, and the state's attorney shall by civil action in the proper court collect the amount of such costs and expenses from the township in which said animal was found. Where such dead animal is found in territory not within the limits of any organized township, it shall be the duty of the state's attorney to forthwith proceed against the owner, and the person having charge of such animal as herein provided.

## CHAPTER 27.99

### PENAL PROVISIONS

Section 27.9901 Board of health regulations or health officer directions: violation; penalty. Every person violating any regulation of the State Board of Health made pursuant to the provisions of section 27.0105, or violating any lawful direction of any board of health or health officer is guilty of a misdemeanor.

Section 27.9902 Vital statistics: general penal provisions; violation of chapter; special penal provisions. Any person, officer, agent, or employee of any other person or of any corporation or partnership shall be guilty of a misdemeanor and upon conviction thereof shall for the first offense be punished by a fine of not less than five dollars nor more than fifty dollars and for subsequent offenses by a fine of not less than ten dollars nor more than one hundred dollars or by imprisonment in the county jail not to exceed sixty days; or by both such fine and imprisonment who shall:

- (1) Inter, cremate, or otherwise finally dispose of a dead body of a human being or permit the same to be done or shall remove said body from the registration district in which the death occurred or the body was found without authority of a burial or removal permit;
- (2) Refuse or fail to furnish correctly any information in his possession or shall furnish false information affecting any certificate or record required by chapter 27.02;
- (3) Wilfully alter, otherwise than as provided by section 27.0218 of this Code, or falsify any certificate of birth or death or any record required by chapter 27.02;
- (4) Being required by chapter 27.02 to fill out a certificate of birth or death and file the same with the local registrar or deliver it upon request to any person charged with the duty of filing the same shall fail, neglect, or refuse to perform such duty in the manner required by chapter 27.02; or
- (5) Being a local registrar, deputy registrar, sub-registrar, or justice of the peace shall fail, neglect, or refuse to perform his duty as required by chapter 27.02 or by the rules and regulations adopted by the State Board of Health or by the instructions and directions of the Director.

Section 27.9903 Itinerant physician: practicing medicine, obstetrics without license; penalty. Any person practicing medicine, surgery, or obstetrics in any of their branches as an itinerant physician as defined in section 27.0309 without having procured

such itinerant license, shall be guilty of a misdemeanor and upon conviction thereof shall be punished by a fine of not less than five hundred dollars nor more than eight hundred dollars or imprisonment in the county jail not less than thirty days nor more than ninety days, or by both such fine and imprisonment.

Section 27.9904 Practice of medicine: without license; without recording license; forged or fraudulent diploma; false affidavit of identification; recording false or fraudulent license; false impersonations; penalty. Any person who shall practice medicine, surgery, obstetrics, or any of the branches thereof in this state without having obtained a license and caused the same to be recorded as required by chapter 27.03; or who shall submit to the State Board of Health any false, forged, or fraudulent diploma or one of which he is not the lawful owner, or any false or forged affidavit of identification, for the purpose of obtaining from such Board any license required by chapter 27.03; or who shall file or attempt to file with the register of deeds of any county in this state any such license belonging to another, representing the same to be his own or any such license issued to another having the name of the person to whom it was issued erased therefrom and his own name, or the name of another inserted in its place, or who shall falsely personate anyone to whom such license has been issued, shall be guilty of a misdemeanor.

Section 27.9926 Electric baths: general violation of chapter; penalty. Any violation of chapter 27.11 relating to electric baths shall constitute a misdemeanor and any person convicted thereof shall be punished by a fine of not less than twenty-five dollars nor more than one hundred dollars or by imprisonment in the county jail not less than thirty days nor more than six months, or both such fine and imprisonment.

Section 27.9927 Maternity homes: violation of chapter; general penalty. Any person who violates any provisions of chapter 27.12 relating to maternity homes shall be guilty of a misdemeanor and upon conviction thereof shall be fined in a sum not to exceed three hundred dollars or may be imprisoned in the county jail not more than one year or may be punished by both such fine and imprisonment.

Section 27.9928 Mausoleums: failure to comply with chapter; penalty. Any person who shall fail or refuse to comply with chapter 27.13 relating to mausoleums shall be guilty of a misdemeanor and upon conviction thereof shall be punished by a fine not exceeding five hundred dollars or by imprisonment in the county jail not exceeding six months.

Section 27.9934 County and local health administration: violation of chapter, violation of rules and regulations of State Board of Health; general penalty. Any person who shall violate any of the provisions of chapter 27.18 or any of the rules and regulations made by the State Board of Health to carry out the provisions thereof, or who shall willfully oppose or obstruct any health officer in performing his duty shall be guilty of a misdemeanor.

Section 27.9935 Quarantine: local health officers failing to act; penalty. Whoever shall violate any of the provisions of section 27.1809 relating to duties of local health officers to enforce quarantines, is guilty of a misdemeanor punishable by a fine not exceeding one hundred dollars.

Section 27.9936 County nurse: unlawful to refuse visitation and inspection. Whoever shall violate any of the provisions of section 27.2008 relating to refusal of visitation and inspection by a county nurse, is guilty of a misdemeanor.

Section 27.9937 Township health regulations; violation; general penalty . Every person who shall violate any rule or regulation made by such township board of health made pursuant to section 27.2102 of the title and duly published shall be guilty of a misdemeanor and upon conviction thereof shall be punished by a fine not exceeding one hundred dollars or by imprisonment in the county jail not exceeding thirty days.

Section 27.9938 Vaccination: violation of chapter; general penalty. Any person who shall violate any provision of chapter 27.22 relating to vaccination shall be guilty of a misdemeanor and upon conviction thereof shall be punished by a fine not exceeding one hundred dollars or by imprisonment in the county jail not exceeding thirty days, or by both fine and imprisonment.

Section 27.9939 Infant blindness: violation of chapter; general penalty. Any person violating any of the provisions of chapter 27.23 relating to infant blindness shall be guilty of a misdemeanor.

Section 27.9940 Venereal disease: violation of chapter or orders of health officers; general penalty. Any person who shall violate any of the provisions of chapter 27.24 relating to venereal disease or any lawful rule or regulation made by the State Board of Health pursuant to the authority therein granted, or who shall fail or refuse to obey any lawful order issued by any state, county, or municipal health officer pursuant to the authority granted in chapter 27.24 of this title shall be guilty of a misdemeanor and shall be punished by a fine of not more than one thousand dollars or by imprisonment for not more than a year, or by both such fine and imprisonment.

Section 27.9941 Dead animals: failure of disposal in accordance with health regulations; penalty. Whenever the owner and the person in charge of any unburied dead animal shall fail to burn or bury or cause the same to be burned or buried, or otherwise dispose of such body or cause the same to be buried in accordance with laws, rules, and regulations as required by chapter 27.25 relating to dead animals, he shall be guilty of a misdemeanor and upon conviction thereof shall be punished by a fine of ten dollars for each dead body so left unburned or unburied or otherwise disposed of.

## PART 2.—REGULATIONS

The following regulations have been duly adopted by the South Dakota State Board of Health and Medical Examiners, approved by the Attorney General and given regular publication.

Violations of these regulations are misdemeanors and fines collected for violations thereof are paid into the state treasury.

J. F. D. COOK, M.D.  
Superintendent and Executive Officer.

### CHAPTER 1

#### COMMUNICABLE DISEASES

Note—Every case of infectious or communicable disease is primarily the source of infection from which other cases may directly or indirectly develop, and efficient measures taken to prevent the spread of infection from them will accomplish the best results.

The early recognition and immediate notification of communicable diseases by the physician in attendance is the foundation upon which public health work is based.

It is the function of the health officer to prescribe and enforce measures for prevention and spread of infection, and this should be done by cooperation with the attending physician and citizens.

##### **Notifiable Diseases.**

##### **Definitions: Quarantine, Isolation, Observation.**

##### **Placarding Premises.**

##### **Control of Communicable Diseases.**

##### **Disinfectants.**

##### **Specific Regulations.**

##### **Protecting the Health of School Children.**

#### NOTIFIABLE DISEASES

##### **Regulation Number 1.**

Section 1. Every physician in the State of South Dakota, who shall treat or examine any person suffering from or afflicted with actinomycosis, acute anterior poliomyelitis, anthrax, Asiatic cholera, cerebrospinal meningitis, chancroid, chicken-pox, diphtheria, erysipelas, glanders, gonorrhea, hookworm disease, influenza, leprosy, malarial fever, measles, ophthalmia neonatorum, pellagra, plague, pneumonia, puerperal fever, rabies, Rocky Mountain spotted fever, scarlet fever, smallpox, syphilis, tetanus, trachoma, trichiniasis, tularemia, tuberculosis, typhoid fever, typhus fever, undulant fever, whooping cough, yellow fever, shall forthwith make a report in

writing to the superintendent of the county board of health upon blanks supplied for that purpose, in which he shall, over his signature, state the name of the disease, and the name, age, sex, color, nativity and occupation, if any, of the person suffering therefrom, together with the street and house number of premises in which said person may be located or otherwise sufficiently designate the same, the date of the onset of the disease, the name and occupation of the householder in whose family the disease may have occurred, the number of children in said household attending school, and the name or names of the school or schools so attended, together with such other information relating to such case as may be required by said health authorities and the State Department of Health.

Section 2. When there is no physician in attendance upon any case of communicable disease mentioned, it shall be the duty of any person having knowledge of the same by reason of attendance, or upon whose premises a case of such disease is suspected to exist, to make a report as specified.

### **QUARANTINE**

#### **Regulation Number 2.**

Definition—By quarantine is meant a limitation of freedom of movement of persons or animals who have been exposed to communicable disease for a period of time equal to the usual incubation period of the disease to which they have been exposed.

### **ISOLATION**

#### **Regulation Number 3.**

Section 1. Definition—By isolation is meant separation of persons suffering from a communicable disease or carriers of the infecting microorganisms from other persons in such places and under such conditions as will prevent the direct or indirect conveyance of the infectious agent to susceptible persons.

Section 2. Disinfection. By this is meant the destroying of the vitality of pathogenic microorganisms by chemical or physical means.

Note 1.—Concurrent Disinfection. Indicates the application of disinfection immediately after the discharge of infectious material from the body of an infected person, or after the soiling of articles with such infectious discharges, all personal contacts with such discharges or articles being prevented prior to their disinfection.

Note 2. Terminal Disinfection. Indicates the process of rendering the personal clothing and immediate physical environment of the patient free from the possibility of conveying the infection to others, at the time when the patient is no longer a source of infection.

**OBSERVATION****Regulation Number 4.**

All other communicable diseases which the State Board of Health does not require to be quarantined or isolated shall be under the observation of the county health officer, who shall take such steps as he may deem necessary to prevent their becoming dangerous to the public health.

**PLACARDING OF PREMISES****Regulation Number 5.**

Section 1. On all premises where a case of diphtheria, meningococcus meningitis, scarlet fever, typhoid fever, smallpox or poliomyelitis exists, there shall be posted in conspicuous places, both at the back and front of the house or apartment, placards bearing the inscription "Communicable Disease" in large letters with the following warning: "All persons are by this means notified of the presence of infectious disease and are warned of the danger of coming in contact with it. It is unlawful to deface, mutilate, cover up or remove this card without the authority of the health officer."

The placard shall not be less than 4 inches in width and 8 inches in length.

The color of the placard shall be red.

Section 2. Where a case of tuberculosis or venereal disease exists, and the precautions necessary to prevent the spread of the disease are not observed, the health officer shall post a placard if, in his opinion, this is necessary to protect the public health.

**THE CONTROL OF COMMUNICABLE DISEASES****Regulation Number 6.**

Section 1. School children, teachers, or others having to do with children, shall be excluded from day school, Sunday school or any public or private gathering whatever for one week of observation after the last exposure to any case of scarlet fever or diphtheria within the household; except that in the case of exposure to diphtheria two consecutive negative cultures from both the nose and throat, secured at any time in accordance with Regulation 8, Section 6, (See diphtheria), after last exposure, shall free the person presenting them of all restraint. Residence in the household where diphtheria or scarlet fever exists shall constitute exposure.

Section 2. A nurse or other person under quarantine with a patient ill with a communicable disease other than diphtheria, who wishes to be released before the quarantine period has expired, must be carefully examined by the health officer, and if

found to be free from the disease and not liable to develop the same, may be released from the quarantine after having a full bath and a thorough disinfection of all clothing worn or taken from the quarantined house.

Section 3. No person or persons shall alter, deface, remove, destroy or tear down any card posted by a local health officer. The occupant or persons having possession or control of the building upon which quarantine notices have been posted, shall, within twenty-four hours after the destruction or removal of such notice by other than the local health officer, notify the local health officer of such destruction or removal.

Section 4. Any person who is infected with smallpox, scarlet fever or diphtheria and who is residing in a common lodging house or hotel, shall be removed therefrom under the supervision of the local health officer to a suitable hospital or place of isolation. If an infected person cannot be removed without danger to his health or for other sufficient cause, the local board of health shall make provision for the care of such individual in the house where he may be found, and may cause if necessary, other persons in the house to be removed therefrom after having been submitted to the necessary disinfection.

Section 5. Whenever a local health officer is informed or has reason to suspect that there is a case of smallpox, scarlet fever, diphtheria, epidemic cerebrospinal meningitis, anterior poliomyelitis, measles, typhoid fever, or tuberculosis within the territory over which he has jurisdiction, he shall immediately examine into the facts of the case and shall employ the sanitary measures directed by the State Board of Health in dealing with such case or cases, and shall immediately notify the superintendent of said board of health of the appearance of such diseases and the measures taken in relation thereto. A report of each case as it occurs shall be made to the aforesaid superintendent by the local health officer.

Section 6. The local health officer shall see that the cleansing or disinfection of any house, building, car, vessel, or vehicle or any part thereof, and of any articles therein likely to retain infection, is carried out at the expense of the quarantined party before the same are released from quarantine.

Section 7. When furniture, bedding, clothing, carpets or other articles have been exposed to infection through contact with infected persons, or articles cannot be disinfected, the same must be destroyed when so ordered by the local board of health.

Section 8. No person shall let or hire, or cause or permit anyone to occupy apartments previously occupied by a person ill with smallpox, scarlet fever, diphtheria, epidemic cerebrospinal menin-

gitis, anterior poliomyelitis, measles, typhoid fever, or tuberculosis until such apartments have been disinfected or cleaned under the supervision of the local health officer according to the instructions of the State Board of Health.

Section 9. Whenever the order or direction of the local health officer requiring the disinfection or cleansing of articles, premises or apartments shall not be complied with, the local health officer shall forthwith cause a placard, in word and form as follows; to be placed upon the door of the apartment or premises:

#### NOTICE

....., S. D.  
..... is a communicable disease.  
These apartments have been occupied by a ..... patient and have become infected. They must not again be occupied until my orders directing the renovation, disinfection or cleansing of same have been complied with.

This notice must not be removed, under penalty of the law, except by an authorized official.

..... Local Health Officer.

Date ....., 19.....

Section 10. No person engaged in handling actual food or food products for sale, no salesman or clerk in grocery or butcher shops, in candy shops, or bakeries or other places where food is sold, and no waiter, waitress, cook or other employee of a hotel, restaurant, boarding house or other places where food is served, shall handle actual food or food products for sale or consumption in any manner whatever, while infected with scarlet fever, diphtheria, smallpox, chickenpox, typhoid fever, or measles; and any person shall be deemed infected if residing, boarding, or lodging in a household where any one or more of the diseases exist.

Section 11. No milk, butter or food or food products to be eaten raw shall be sold or given to any party or delivered to any creamery or butter factory, store, shop, or market from a house where a case of scarlet fever, diphtheria, smallpox, chickenpox, typhoid fever, acute anterior poliomyelitis, or measles exists; nor shall any members of such household handle milk or milk products for sale in any manner whatever. The sale of such food or food products is forbidden from farm premises where any of the specified diseases exist, except under the following condition.

Complete separation of the farm work from the household concerned shall be made so that the household shall be quarantined against the rest of the farm, and no communication whatever shall

continue. Those having to do with the food products shall eat, sleep and work wholly outside the infected house and shall in no way handle anything or person whatever coming from the infected house, or connected with it, nor shall those quarantined in the house handle any person or anything connected with the food or food products, or those working with the food or food products in any manner whatever.

Section 12. Milk, food stuffs, and other necessities may be delivered to the quarantined premises but there must be no contact between the patient or attendant and the delivery agents. No milk bottle, basket or any other article whatsoever may be taken out or away from the premises except when they are disinfected under the direction of the county health authorities. Mail which has been handled by the patient or attendant must not be taken away from the premises.

### **DISINFECTANTS**

Disinfection shall mean the destruction of the vitality of pathogenic microorganisms by chemical or physical means.

Concurrent disinfection is required during the existence of any communicable diseases. It shall consist of the collecting of the communicable discharge of the patient during the course of the disease; the burning of the same, or the application of a disinfectant solution to render same inert. Concurrent disinfection is of the greatest importance, for the organisms which cause communicable diseases, are for the most part parasitic and depend upon their residence in the human system for their propagation. Under the usual conditions outside the body the bacteria of human diseases will not grow and soon will die. The communicable discharges, therefore, must be collected in covered receptacles. Bed linens and linens such as night gowns used by patient should be changed at least every 48 hours, where this will not interfere with the well being of the patient, immediately placed in disinfectant solution such as 2 percent liquor cresolis compound, U.S.P., 5 percent solution of carbolic acid, or an equivalent disinfectant solution. Discharges from nose and throat should be collected in rag or paper and immediately burned. Feces and urine should be thoroughly mixed with an equal part of chloride of lime, or one of the above named solutions, and allowed to stand for an hour in covered receptacle before emptying.

Terminal disinfection when required by these rules should be defined to include these things:

Fumigation—disinfection through the liberation in the infected rooms of formaldehyde gas or other similar disinfecting agents is not now required under the state regulations. If house-

holders desire to have their premises fumigated they can do so but they must pay for the cost of materials and labor. Experience proves conclusively that disinfection by chemical means, together with thorough cleaning is more efficient and can be accomplished at less expense.

Costs—Where terminal disinfection by chemical means is required under the state regulations, the chemical disinfectant must be delivered to the family by the local health officer or his representative and paid for by the county. The family is required to do the work of cleaning up the infected rooms under the direction of the health officer or his representative. This work must be thoroughly done before the quarantine sign can be removed from the home and the members of the family liberated. In cases where the work of cleaning up the home can be done by washing all surfaces and articles which may be infected, with soap and water, or lye and water, the family must be instructed by the health officer as to what is required and he should see to it that the work is properly done before the quarantine is raised or the placard removed from the home.

Persons—In those diseases in which disinfection of the person is required, the entire body of the patient, including hair and beard, should first be thoroughly cleaned with green soap and anti-septic soap and warm water, after which the entire body should be again bathed in clean water. The bath should be so arranged that the patient can go from the bathroom to a clean room without coming in contact with anything that has been in the sick room. In the clean room fresh clothing which has not been in contact with anything or anyone from the sick room may be put on.

Other Articles—Bedding and personal linen should be boiled, other articles that cannot be boiled, such as woolen clothing, silks, furs, etc., must be spread out and exposed to direct sunlight for three days. Toys of little value, magazines and papers which come in contact with the patient should be burned.

Books—In cases where it is essential to disinfect books which may have become infected, the following requirements must be followed. Library books and school books which have been in a quarantined home should be withheld from circulation until they have been exposed to direct sunlight for a period of 15 days, opened daily in such a manner that the maximum number of pages will be reached. Books used by a tubercular person should be burned or withheld from circulation until they have been exposed to direct sunlight for a period of 30 days, opened daily in such a manner that the maximum number of pages will be reached.

Fumigation of books—the use of formaldehyde for fumigation of books is not effective.

## ACTINOMYCOSIS

Observation—See Regulation No. 4.

## ACUTE ANTERIOR POLIOMYELITIS

### Regulation Number 7.

Etiological agent: A specific filterable virus.

Source of infection: Nose and throat discharges of infected persons and carriers, or articles recently soiled therewith. Unpasteurized milk is a rare source of infection.

Mode of transmission: The virus enters the brain by way of the olfactory nerves and bulb when introduced into the nose or naso-pharynx of a susceptible person, presumably from a carrier in most instances.

Incubation period: Commonly 7 to 14 days.

Period of communicability: Not definitely known, but apparently covered by the latter part of the incubation period and the first week or two of the disease—possibly much longer in a very few cases, but cases are not as a rule directly traceable to any previous case.

Section 1. Reports: Every physician, attendant, parent, householder or other person having knowledge of a known or suspected case of acute anterior poliomyelitis (infantile paralysis) must immediately report the case to the superintendent of the county board of health, who shall at once notify, by telegraph, the superintendent of the State Board of Health, message to be sent collect, government rate.

#### Placards required.

Section 2. QUARANTINE. Exposed children of the household of school age are to be kept from school, and adults of the household whose vocations bring them in contact with children or with food to be eaten uncooked, are to be kept from such vocation for 14 days after last exposure to recognized cases.

Section 3. ISOLATION. For two weeks from onset. All children with fever should be isolated pending diagnosis. Almost invariably the period of restriction of visitors and care in bed desirable for the patient extends beyond the period of presumed communicability of the disease.

Section 4. Protection of children so far as practicable against unnecessary contact with other persons especially those outside their own homes, during epidemic prevalence of the disease. Avoidance of unnecessary physical strain in children during an epidemic or in case of known exposure.

**ALWAYS USE CONCURRENT DISINFECTION**

Section 5. CONCURRENT DISINFECTION. Nose and throat discharges and articles soiled therewith.

Terminal disinfection. Thorough cleaning.

See Regulation 6. Sections 11 and 12.

### **ANTHRAX**

Observation. See Regulation No. 4.

### **ASIATIC CHOLERA**

Quarantine. Wire or telephone the superintendent of the State Board of Health, for special instructions.

### **CHICKEN POX**

Observation. See Regulation No. 4.

### **DIPHTHERIA**

#### **Regulation Number 8.**

Etiological Agent: Diphtheria bacillus, Corynebacterium diphtheriae, the Klebs Loeffler bacillus.

Source of infection: Discharges from diphtheritic lesions of nose, throat, conjunctiva, vagina and wound surfaces. Secretions from the nose and throat of carriers of the bacillus.

Mode of transmission: Directly by personal contact, indirectly by articles freshly soiled with discharges, or through infected milk or milk products.

Incubation period: Usually 2 to 5 days; occasionally longer if the carrier state precedes the development of clinical symptoms.

Period of communicability: Variable until virulent bacilli have disappeared from the secretions and the lesions. Usually 2 weeks or less, seldom over 4 weeks. In exceptional cases virulent bacilli remain in the throat and discharges from 2 to 6 months.

Immunization: Passive immunization with antitoxin is rarely necessary for exposed persons over 5 years of age, for whose protection daily examination by a physician or nurse suffices. Infants and young children exposed to diphtheria in the family should receive a prophylactic dose of antitoxin without prior Schick testing, unless they are already known to the physician to be immune.

Active immunization of all children, without prior Schick testing, at the age of 6 months, with a diphtheria toxoid. This same procedure should be applied to all children at or below 6 years of age if immunization has been neglected in infancy.

Older children, and adults especially exposed, including teachers, nurses and physicians found to be Schick-positive, should be

**ALWAYS USE CONCURRENT DISINFECTION**

actively immunized. In order to minimize local and constitutional reactions in members of these groups, it is desirable to carry out a preliminary "toxoid reaction test," nonreactors to receive toxoid, and reactors toxin-antitoxin in 2 or 3 inoculations or suitably diluted toxoid.

Section 1. REPORT. The local health officer having knowledge of or having reason to suspect the existence of diphtheria shall, personally or through the attending physician, immediately secure a culture from the nose and throat of the suspected individual and submit the same to the state health laboratory for examination. A suspicious case must be quarantined as diphtheria until the diagnosis is confirmed or denied by the laboratory findings. Any doubtful clinical case of diphtheria must be quarantined even with negative findings from the first laboratory examination. Cultures may be submitted to municipal or private laboratories if the same have the endorsement of the State Board of Health.

Section 2. QUARANTINE. All intimate contacts until shown by bacteriological examination not to be carriers.

Section 3. ISOLATION. Until 2 cultures from the throat and 2 from the nose, taken not less than 24 hours apart, fail to show the presence of diphtheria bacilli. Isolation may be terminated if the microorganisms reported as morphologically "positive" although persistently present, prove to be an avirulent form. Where termination by culture is impracticable, cases may be terminated with fair safety as a rule 16 days after onset of the disease. A virulence test should be made, if practicable, where positive throat cultures are reported 3 weeks or longer after onset of the disease.

It is recommended that requests for virulence tests be limited to these cases in which diphtheria bacilli are found to persist in release cases after not less than 4 weeks following onset and after adequate local treatment has failed to clear the areas of diphthomorphous bacilli as evidenced by repeated positive cultures during convalescence; and contacts or carriers who fail to respond to local treatment.

**Placard required.**

Section 4. CONCURRENT DISINFECTION. Of all articles which have been in contact with the patient and all articles soiled by discharges of the patient.

Terminal Disinfection. At the end of illness thorough airing and sunning of sick room, with cleaning or renovation.

Section 5. CARRIERS. If any member of household, (patients or others) continues to carry diphtheria bacilli, quarantine of the household shall be raised six weeks (42 days) after the subsidence of clinical symptoms in the last case, but restrictions of in-

**ALWAYS USE CONCURRENT DISINFECTION**

fected members of household and others must be continued as provided for under Section 6.

Section 6. Patients or others remaining infected longer than six weeks following subsidence of clinical symptoms in the last case, shall not be permitted to attend any public, private or parochial school, church, or Sunday School, or any public or private gathering, until two consecutive negative tests of separate nose and throat cultures have been reported in accordance with Section 3.

All children in the household shall be subject to the above restrictions unless isolation of the infected persons obtains, when the health officer shall issue written permit which may be revoked if conditions are not complied with.

The health officer may give permission for persons remaining infected longer than six weeks to go in his office or that of his authorized agent for the purpose of having cultures taken.

See Regulation No. 6, Sections 11 and 12.

#### **ENCEPHALITIS**

Regulation Number 59. See page ——.

#### **ERYSIPelas**

##### **Regulation Number 9.**

ISOLATION. Every case of erysipelas shall be isolated in a room used for no other purpose. No dressings, bedding or clothing, eating utensils or other things used or touched by the patient shall be removed from the room until disinfected. No person except the necessary attendants shall enter the room, nor shall anyone leave the room without thorough disinfection of clothing or person, especially the hands, etc., which may have been in contact with the patient, the patient's bed, bedding, clothing, eating utensils or other things used or touched by the patient. Where the mucous membrane of the orifices of the patient's body are involved, disinfection of all the discharges of the orifices concerned shall be made.

#### **GLANDERS**

Observation. See Regulation No. 4.

#### **HOOKWORM DISEASE**

Observation. See Regulation No. 4.

#### **INFLUENZA**

##### **Regulation Number 10.**

Etiological agent: A filterable virus associated often with various types of bacteria as secondary invaders.

**ALWAYS USE CONCURRENT DISINFECTION**

Source of infection: Probably discharges from the mouth and nose of infected persons and articles freshly soiled by such discharges.

Mode of transmission: Believed to be by direct contact, by droplet infection, or by articles freshly soiled with discharges of the nose and throat of infected persons.

Incubation period: Short, usually 24 to 72 hours.

Period of communicability: Undetermined possibly in prodromal as well as in the febrile stage and convalescent stages.

Immunization: None.

Placard not required.

Section 1. QUARANTINE. None, but visiting should be discouraged.

Isolation. During acute stage of the disease, especially in severe cases and those complicated by pneumonia.

Section 2. CONCURRENT DISINFECTION. Discharges from the nose and throat of the patient.

Terminal disinfection. Thorough cleaning.

Note 1.—General Measures: During epidemic all efforts shall be made to reduce opportunities for direct contact infection, as in crowded halls, stores, and street cars. Kissing, the use of common towels, glasses, eating utensils, or toilet articles should be avoided. In isolated towns and institutions infection has been delayed and sometimes avoided by strict exclusion of visitors from already infected communities. The closing of the public, parochial and private schools has not been effective in checking the spread of infection. The judicious use of masks by nurses and other attendants may prove of value in preventing infection in hospitals. Scrupulous cleanliness of dishes and utensils used in preparing and serving food in public eating places shall be required, including the subjection of such articles to disinfection in hot soap suds. In groups which can be brought under daily professional inspection, the isolation of early and suspicious cases of respiratory tract inflammation, particularly when accompanied by a rise in temperature, may delay the spread of the disease. To minimize the severity of the disease, and to protect the patient from secondary infections and thus reduce mortality, patients should go to bed at the beginning of the attack and not return to work without the approval of their physician.

Note 2—Crowding of beds in hospitals and institutions to accommodate increased number of patients and other inmates is to be especially avoided. Increasing spacing between beds in wards and dormitories shall be carried out to reduce the risk of attack, and of the occurrence of pneumonia.

**ALWAYS USE CONCURRENT DISINFECTION**

**LEPROSY**

Isolation. Wire or telephone superintendent of the State Board of Health for special instructions.

**MALARIAL FEVER**

Observation. See Regulation No. 4.

Isolation. The individual with malarial parasites in his blood should be protected from the bites of mosquitoes. With the exception of this simple precaution, isolation and quarantine are of no avail.

**MEASLES****Regulation Number 11.**

Etiological Agent: A specific filterable virus.

Source of infection. Buccal and nasal secretions of an infected individual.

Mode of Transmission: Directly from person to person; indirectly through articles freshly soiled with the buccal and nasal discharges of an infected individual. The most easily transmitted of the communicable diseases.

Incubation period: About 8 to 10 days from date of exposure to onset of fever; 12 to 14 days to appearance of rash; rarely as long as 18 days. When convalescent serum has been used, but too late to prevent infection, the incubation period may be as long as 21 days.

Period of communicability: During the period of catarrhal symptoms and until the cessation of abnormal mucous membrane secretions.

CONCURRENT DISINFECTION: All articles soiled with the secretions of the nose and throat.

Terminal disinfection: Thorough cleaning.

Section 1. QUARANTINE. All susceptible school children and teachers shall be excluded from school until 14 days have elapsed since last exposure. This applies to exposure in the household. Exclusion of exposed susceptible children from all public gatherings for the same period. If the date of only exposure is reasonably certain an exposed susceptible child of school age may be allowed to attend school for the first 7 days of the incubation period. Quarantining of institutions of young children and of wards or dormitories where exposure is suspected, is of some value. Strict quarantine of wards of infants if a case occurs in an institution is required.

Section 2. ISOLATION. All cases of measles shall be isolated as soon as the nature of the affection is suspected, and such isol-

**ALWAYS USE CONCURRENT DISINFECTION**

tion shall be continued for a minimum period of 9 days; from 4 days before to 5 days after the appearance of the rash.

Note 1—Immunization. By the use of the serum or whole blood of convalescent patients, or of any healthy adults who have had measles, given within 5 days after exposure to a known case of measles or by the use of immune globulin, the attack in the exposed person may be averted in a high percentage of instances; if not averted the disease is modified. Given later, but at a time prior to the clinical onset of the disease, convalescent serum usually modifies the severity of the attack and the patient probably acquires the usual immunity to the disease.

Section 3. During the prevalence of measles in a community teachers and others in charge of schools shall exclude children presenting catarrhal symptoms indicative of the disease. Teachers shall report to the health officer immediately the names of the pupils so excluded. Before permitting a child to return to school, a certificate shall be required from the health officer or attending physician that it is no longer likely to convey infection.

Note 1—Provisions shall be made to prevent the exposure of young children under three to those exhibiting fever and acute catarrhal symptoms of any kind, particularly during years and seasons of epidemic prevalence of measles. No new admissions and no visitors under 16 years of age shall be permitted in an institution for children, during a measles outbreak in the community or in the institution.

### **OPHTHALMIA NEONATORUM (ACUTE INFECTIOUS CONJUNCTIVITIS)**

#### **Regulation Number 12.**

Section 1. OBSERVATION. Whenever one or both eyes of an infant shall become inflamed at any time within two months after its birth, it shall be the duty of any midwife, nurse, parent, physician or other person having charge of such infant, to report the facts of such affection to the local health officer of the county in which the person having charge of such infant resides, within six hours after ascertaining the fact.

Section 2. Any health officer to whom may have been reported a case of eye disease in a child under two months of age shall forthwith visit such child and provide immediate medical treatment unless said child is already under the treatment of a competent medical practitioner.

Section 3. It shall be the duty of any physician, midwife, nurse, parent or other person in charge of the delivery of any

infant, to instill prophylactic silver solution in the eyes of the newborn.

### MENINGOCOCCUS MENINGITIS

#### Regulation Number 13.

Etiological Agent: Meningococcus; *Neisseria intracellularis*.

Source of infection: Discharges from the nose and mouth of infected persons. Clinically recovered cases, and healthy persons not known to have had the disease but recently in contact with cases or other carriers, may act as carriers and are commonly found, especially during epidemics. Such healthy carriers are found independent of epidemic prevalence of the disease, even up to 5 to 10 percent of a general population.

Mode of transmission: By direct contact with infected persons and carriers and indirectly by contact with articles freshly soiled with the nasal and mouth discharges of such persons.

Incubation period: Two to ten days, commonly seven.

Period of communicability: During the clinical course of the disease, and until the specific microorganism is no longer present in the nasal and mouth discharges of the patient, about two weeks. The same applies to healthy carriers, so far as affects persistence of infectious discharges. Readily communicable in crowded living conditions among persons of lowered resistance.

Immunization: None.

Section 1. ISOLATION of infected persons until 14 days after onset of the disease or until negative cultures are obtained from the naso-pharynx.

Section 2. Increase the separation of individuals and the ventilation in living and sleeping quarters for such groups of people as are especially exposed to infection because of their occupation or some necessity of living conditions. Chilling, bodily fatigue, and strain should be minimized for those especially exposed to infection.

Section 3. CONCURRENT DISINFECTION: Of discharges from the nose and mouth or articles soiled therewith.

Terminal disinfection. Cleaning.

Placard required.

### PELLAGRA

Observation. See Regulation No. 4.

**ALWAYS USE CONCURRENT DISINFECTION**

**PLAQUE**

Quarantine. Wire or telephone the superintendent of the State Board of Health for special instructions.

**PNEUMONIA****Regulation Number 14.**

It shall be the duty of any person diagnosing or treating a case of acute pneumonia to report the existence of such a disease, to the superintendent of the county board of health, upon cards provided for that purpose.

**PUERPERAL FEVER****Regulation Number 15.**

Section 1. Isolation of the case and strict aseptic technique on the part of the attendants who are apt to act as an intermediary for transmission.

**RABIES****Regulation Number 16.**

Section 1. When an animal suspected of having rabies has bitten a human being, the fact shall be immediately reported to the county health officer who shall secure or cause to be secured such animal, alive and without injury, where this can be accomplished with safety. The animal shall be confined in a safe, quiet, roomy and comfortable place for a period of two weeks if death does not intervene. A report giving full particulars shall be sent immediately to the superintendent of the State Board of Health. This report shall include the name of the locality in which biting occurred (city, village or township), the date of biting; the name, residence and address of the owner of the animal; the full name or names of persons bitten by the animal in question together with the place of residence of each; the names, addresses and residences of all owners of animals which have been bitten by the animal in question, together with a list and description of the animals bitten and the disposition made of same.

Section 2. When it becomes necessary to kill such suspected animal, it must be done in such a way that no injury will be made to the brain. When an animal suspected of having rabies dies from the disease, or is killed, the head must be cut off and sent to the State Health Laboratory. It should be first wrapped in clean cloth and then carefully packed in a quantity of sawdust and ice, using such an amount of ice as will insure its reaching the laboratory in a good condition.

**ALWAYS USE CONCURRENT DISINFECTION**

**ROCKY MOUNTAIN SPOTTED FEVER****Regulation Number 17.**

Etiological agent: A gram, negative, intercellular microorganism which has not been cultivated or filtered (Dermacentroxykus rickettsi Wolbach.)

Source of infection: Ticks.

Mode of transmission: Bite of tick, mashing of tick on skin.

Incubation period: From 3 to 10 days.

Period of communicability: Not communicable from man.

Section 1. It shall be the duty of anyone diagnosing a case of Rocky Mountain Spotted Fever (Tick Fever) to report the same to the superintendent of the State Board of Health by telegraph or phone.

Section 2. QUARANTINE. None.

ISOLATION. None.

Section 3. CONCURRENT DISINFECTION. All ticks on the patient should be destroyed.

Terminal disinfection. Thorough cleaning.

**SCARLET FEVER****Regulation Number 18.**

Etiological Agent: A hemolytic streptococcus.

Source of infection: Discharges from the nose, throat, ears, abscesses, or wound surfaces of sick or convalescent patients, and articles freshly soiled therewith. The nose and throat discharges of carriers may also spread the disease.

Mode of transmission: Directly by contact with an infected person, indirectly by articles freshly soiled with discharges of an infected person, or through contaminated milk or milk products, not by skin desquamation.

Period of communicability: Usually until three weeks from the onset of the disease, without regard to the stage or extent of desquamation, but until all abnormal discharges have ceased and all open sores or wounds have healed. Adults convalescent from scarlet fever appear to be less likely to transmit infection than are children. The infectious agent is more likely to be transmitted in colder seasons of the year.

Section 1. QUARANTINE. Exclusion of exposed children and teachers from association with children and food handlers from their work, until 7 days have elapsed since last exposure to a recognized case, shall be mandatory. Where daily examination of

**ALWAYS USE CONCURRENT DISINFECTION**

contacts by nurse or physician is possible, these contacts need not be excluded.

Section 2. ISOLATION. Each case shall be isolated in the home or hospital until the end of the period of communicability. If medical inspection is not available, isolation for 21 days from onset in uncomplicated cases shall be imposed and additional exclusion from school and public places for a period of seven days.

Section 3. Placards required during period of communicability.

Section 4. CONCURRENT DISINFECTION: Of all articles which have been in contact with a patient and all articles soiled with discharges of the patient.

Terminal disinfection. Thorough cleaning.

Refer to Regulation 6, Sections 11 and 12.

### SEPTIC SORE THROAT

#### **Regulation Number 19.**

Etiological agent: Streptococcus (hemolytic type).

Source of infection: The human naso-pharynx, usually the tonsils, any case of acute streptococcus inflammation of these structures being a potential source of infection, including the period of convalescence of such cases. The udder of a cow infected by the milker is a common source of infection. In such udders the physical signs of mastitis may be absent.

Mode of transmission: Direct or indirect human contact; consumption of raw milk contaminated by case or carrier or from an infected udder.

Incubation period: One to three days.

Period of communicability: In man, presumably during the continuance of clinical symptoms; in the cow, during the continuance of discharge of the streptococci in the milk, the condition in the udder tending to a spontaneous subsidence. The carrier stage may follow convalescence and persist for some time.

Immunization: None.

Section 1. It shall be the duty of any person diagnosing a case of Septic Sore Throat to report the same in writing to the superintendent of the county board of health upon the card provided.

Section 2. QUARANTINE. None.

ISOLATION. During the clinical course of the disease and convalescence, and particularly exclusion of the patient from participation in the production or handling of milk or milk products.

**ALWAYS USE CONCURRENT DISINFECTION**

Section 3. CONCURRENT DISINFECTION. Articles soiled with discharges from the nose and throat of the patient.

Terminal disinfection. Cleaning.

Section 4. All suspected milk supplies must be excluded from public sale until pasteurized.

All persons suffering from Septic Sore Throat or carriers of the disease shall be prevented from handling milk or milk products.

See Regulation No. 6, Sections 11 and 12.

### SMALLPOX

#### Regulation Number 20.

Etiological Agent: A specific filterable virus.

Source of infection: Lesions of the mucous membranes and skin of infected persons.

Mode of transmission: By contact with person sick with the disease. This contact need not be intimate, but aerial transmission through more than a few feet is unlikely; by articles of person contaminated by discharges of the sick including feces and urine, but for a brief time.

Incubation period: Eight to sixteen days (cases with incubation period of 21 days are reported.)

Period of communicability: From first symptoms to disappearance of all scabs and crusts.

Section 1. Placard for period of communicability.

Section 2. QUARANTINE. Isolation of all contacts until vaccinated with virus of full potency and daily medical observation of these contacts until height of reaction is passed, if vaccination was performed within 24 hours of first exposure; otherwise for 16 days after last exposure.

Section 3. The case shall be isolated at home or in the hospital in a screened room until the period of infectivity has passed. All persons having been exposed to smallpox shall be vaccinated unless they have previously had smallpox or have been successfully vaccinated within five years. All persons refusing to be vaccinated shall remain isolated for a period of fourteen days.

Section 4. CONCURRENT DISINFECTION of all discharges: Not an article to leave the surroundings of the patient without boiling or equally effective disinfection.

Terminal disinfection. Thorough cleaning and disinfection of premises.

**ALWAYS USE CONCURRENT DISINFECTION**

**TETANUS**

Observation. See Regulation No. 4.

**TRACHOMA**

Section 1. In such counties where schools are attended by Indian pupils, the health officers shall at least every ninety days examine said schools, and if any pupils are found to be affected with trachoma in the active stage shall be excluded from school or close association with other individuals, unless under the constant care and strict supervision of a competent physician as in such cases where schools are conducted by the United States Government and have a regularly appointed physician in charge.

**TRICHINIASIS**

Observation. See Regulation No. 4.

**TUBERCULOSIS—PULMONARY****Regulation Number 22.**

Etiological agent: Tubercle bacillus (human) *Mycobacterium tuberculosis (hominis)*. Tubercle bacilli of bovine type have been isolated from pulmonary lesions in man; avian type rarely.

Source of infection: The specific microorganisms present in the discharges, or articles freshly soiled from the discharges, from any open tuberculosis lesions, the most important discharge being sputum. Of less importance are discharges from the intestinal and genito-urinary tracts, or from lesions of the lymph nodes, bone, and skin.

Mode of transmission: Usually through the discharges of the respiratory tract, occasionally through those of the digestive tract, by direct or indirect contact with infected person, by means of coughing, sneezing, or other droplet infections, by kissing, by the use of contaminated eating and drinking utensils, and possibly by contaminated flies and dust. Infection rarely occurs from casual contact, but usually results from the continued type of exposure characteristic of family relationships.

Incubation period: Variable and dependent upon the type of the disease.

Period of communicability: As long as the specific microorganism is eliminated by the host. Commences when a lesion becomes an open one, i.e., discharging tubercle bacilli, and continues until it heals or death occurs. The degree of communicability varies with the number and virulence of the bacilli discharged, the frequency of exposure, and the susceptibility of the persons exposed.

**ALWAYS USE CONCURRENT DISINFECTION**

Section 1. All individuals afflicted with tuberculosis of the lungs in the communicable form or reasonably suspected of being so afflicted shall exercise all reasonable precautions so as to prevent the infection of others with whom they may come in contact. The principal reasonable precautions are declared to be:

1. Depositing sputum in a special receptacle and disposing of material by burning or thorough disinfecting.
2. Preventing spraying when coughing by coughing into a container or paper napkin held to the mouth or nose.
3. Using individual eating utensils sterilized by boiling after each use.
4. Using separate towels.
5. Sleeping alone.
6. Avoiding coming in contact with children on all possible occasions.
7. Refraining from handling liquids or foodstuffs to be consumed by others or the utensils connected with such handling.

Section 2. QUARANTINE. Any individual afflicted with tuberculosis of the lungs in the communicable form, diagnosed as such by a licensed physician or as shown by X-ray or the presence of tubercle bacilli in the sputum, in order to protect others from becoming infected, may be quarantined on his premises by the local board of health or the health officer on the direction of the State Board of Health or State Health Officer, or by the full-time medical health officer of any city or county.

A placard shall be posted in a conspicuous position on the premises quarantined with the word "Quarantine" in letters not less than two inches high and containing the following: "All persons except the health officer or his representative, attending physicians and nurses and clergymen, are forbidden to enter or leave these premises without a special written permit from the health officer, and all persons are forbidden to remove, obscure or mutilate this card or to interfere in any way with this quarantine without written orders from said health officer.

The local board of health or health officer may employ as many persons as are necessary to execute its orders and properly guard any quarantine place if quarantine is violated or intent to violate quarantine is manifested. Said persons shall be sworn in as quarantine guards, shall have police powers, and may use all necessary means to enforce the state laws for the prevention and control of communicable diseases, or for the enforcement of these rules and regulations.

The expense of maintaining quarantine including examinations and tests to determine the presence or communicability of the disease, and the enforcement of isolation on the premises shall be paid by county upon order of the local board of health.

The expenses for necessary nurses, medical attention, food and other articles needed for the comfort of the afflicted person shall be charged against him or whoever is liable for his support. Indigent cases shall be cared for at public expense.

Any individual who has been quarantined on the premises under provision of these rules shall be released from such quarantine by the local board of health or health officer on direction of the State Board of Health or State Health Officer or by the full-time Medical Health Officer of any city or county within his jurisdiction when in the opinion of said Health Officer the quarantine is no longer necessary to protect others from becoming infected.

Section 3. No person with tuberculosis of the lung or other part of the respiratory tract in the communicable form, or reasonably believed to be suffering from such disease, shall be permitted to attend or frequent any school except open-air schools especially equipped for the purpose until the health officer of the municipality where the school is situated furnishes a written certificate stating that the individual is free from a communicable form of tuberculosis. Such certificate shall only be issued after thorough examination by a licensed physician in a manner satisfactory to the State Board of Health.

Section 4. If an individual afflicted with tuberculosis shall leave the sanatorium against the advice of the medical superintendent or medical supervisor, such an individual shall be reported to the local board of health and may be quarantined upon his premises as provided in Section 2, if in the opinion of the State Board of Health or the State Health Officer or of the full-time health officer of cities or counties agree that quarantine is necessary in order to protect others from becoming infected.

Section 5. The local health officer or an individual delegated by him shall visit all individuals quarantined for tuberculosis at least once every thirty days to ascertain that the quarantine is being maintained and to ascertain whether to make recommendations for release from quarantine or for admission to a tuberculosis sanatorium.

Section 6. Any individual quarantined for tuberculosis may obtain release from such quarantine by being admitted to a tuberculosis sanatorium.

Section 7. Individuals afflicted with tuberculosis in any form

**ALWAYS USE CONCURRENT DISINFECTION**

and diagnosed as such by a competent physician shall exercise every care and precaution for the protection of others.

Section 8. Disinfection. All handkerchiefs, towels, cloths, eating utensils and other contaminated material used by a person with tuberculosis shall receive appropriate disinfection before coming in contact with others. Upon the death or removal of a person with tuberculosis the health officer shall require disinfection of the premises occupied by the patient by a thorough washing of the wood-work by soap and water or a disinfectant, boiling of the dishes and contaminated fabrics, and a thorough sunning of material which cannot be subjected to other disinfection.

#### TUBERCULOSIS—OTHER TYPES

##### **Regulation Number 23.**

Etiological agent: Tubercl bacillus (human and bovine) *Mycobacterium tuberculosis (hominis et bovis)*.

Source of infection: Discharges from mouth, nose, bowels, and genito-urinary tract of infected human beings; the discharging lesion of bones, joints and lymph glands; articles freshly soiled with such discharges; milk from tuberculous cattle.

Mode of transmission: By direct contact with infected persons, by contaminated food, and possibly by contact with articles freshly soiled with the discharges of infected persons.

Incubation period: Unknown.

Period of communicability: Until discharging lesions are healed.

Section 1. QUARANTINE—None.

ISOLATION—None.

Section 2. CONCURRENT DISINFECTION—Discharges and articles freshly soiled with them.

Terminal disinfection: Cleaning.

Section 3. No milk or milk products shall be offered for sale from infected herds of cattle.

Patients with open lesions shall not be permitted to handle foods.

See Regulation No. 6. Sections 11 and 12.

#### TULAREMIA

##### **Regulation Number 24.**

Etiological agent: *Bacterium tularensis* (*Pasteurella tularensis*)

Source of infection: Wild rabbits and hares, horse fly (*Chrysops discalis*), wood tick, (*Dermacentor andersoni* and *Dermacentor variabilis*), woodchuck, coyote, muskrat, opossum, tree squirrel,

**ALWAYS USE CONCURRENT DISINFECTION**

quail, skunk, water rat of Europe (*Arvicola amphibius*), cat, deer, dog, fox, hog, sage hen and bull snake.

Mode of transmission: By bites of infected flies and ticks and by inoculation through handling infected animals, or by fluids from infected flies, ticks, rabbits and woodchucks. Ingestion of insufficiently cooked rabbit meat. Rare cases occur from bites of coyotes, skunks, hogs, cats, and dogs, where the mouth of the animal was presumably contaminated from eating infected rabbits.

Period of Incubation: From 24 hours to 10 days, average slightly more than 3 days.

Period of communicability: There is no authentic record of transfer of the disease from man to man. The infection has been found in the blood of man during the first two weeks of the disease; in conjunctival scrapings up to 17 days; in the primary lesion on the finger up to 21 days; in the sputum of the 12th day; in lymph glands up to 5 months; in ascitic fluid (taken during life) 3 months after onset; in pleural fluid 4 months after onset; in spinal fluid 16 days after onset; in the spleen taken at autopsy up to 30 days. Flies are infective for 14 days; ticks through their lifetime. Refrigerated rabbits kept constantly frozen at -15° C. may remain infective for 3 years.

#### Section 1. QUARANTINE—None.

Isolation: None.

Section 2. CONCURRENT DISINFECTION: Disinfection of discharges from the ulcer, lymph glands, or conjunctival sac.

Terminal disinfection: Thorough cleaning.

### TYPHOID FEVER

#### Regulation Number 25.

Etiological agent: Typhoid bacillus, *Eberthella typhi*.

Source of infection: Bowel discharges and urine of infected individuals. Healthy carriers are common.

Mode of transmission: Conveyance of the specific microorganism by direct or indirect contact with a source of infection. Among indirect means of transmission are contaminated water, milk, and shellfish, and probably flies.

Incubation period: From 3 to 38 days, usually 7 to 14 days.

Period of communicability: From the appearance of prodromal symptoms, throughout the illness, and relapses during convalescence, and until repeated bacteriological examination of the discharges show continuous absence of the infecting organism.

#### Section 1. QUARANTINE—None.

**ALWAYS USE CONCURRENT DISINFECTION**

**ISOLATION**—Any person suffering with typhoid fever shall be isolated in a fly-proof room, preferably under hospital conditions, of such cases as cannot command adequate sanitary environment and nursing care in their homes. Release from isolation should be determined by two successive negative cultures of stool and urine specimens collected not less than 24 hours apart. Reports of examination of feces and urine cultures for release from isolation shall be acceptable only from laboratories approved by the State Board of Health to make such examinations.

Section 2. **CONCURRENT DISINFECTION**—Disinfection of all bowel and urinary discharges and articles soiled with them.

**Terminal disinfection—Cleaning.**

Section 3. It shall be the duty of the health authorities in the community infected with typhoid to make the proper immunization for typhoid fever available to anyone applying for the same.

Section 4. Whenever typhoid fever is prevalent in a locality, the local board of health shall immediately notify the State Board of Health who shall immediately take steps as are necessary to control the disease.

### **TYPHUS FEVER**

**QUARANTINE**—Wire or telephone the Superintendent of the State Board of Health for special instructions.

### **UNDULANT FEVER**

#### **Regulation Number 26.**

Etiological agent: *Brucella melitensis* (*Alkaligenes melitensis*, *Micrococcus melitensis*) *Brucella abortus* (*Akaligenes abortus*; *Brucella suis*.)

Source of infection: The tissues, blood, milk and urine of infected animals, especially goats, cattle and swine.

Mode of transmission: By ingestion of milk from infected animals and by direct contact with infected animals or animal products.

Incubation period: Six to 30 days or more.

Period of communicability: Practically not communicable from person to person. From the onset of the disease until the micro-organism is no longer found in the urine, usually 90 days, with a range of 20 to 300 days.

Section 1. It shall be the duty of the health officer in charge, in the case of an outbreak of Undulant Fever to require pasteurization of all milk supplies in the community. The health officer shall make provisions for a thorough search for infection among

**ALWAYS USE CONCURRENT DISINFECTION**

livestock by agglutination reaction and elimination of infected animals from the herd by segregation or slaughter.

Section 2. QUARANTINE—None.

ISOLATION—None.

Section 3. CONCURRENT DISINFECTION — Unnecessary in presence of ordinary sanitary precautions.

Terminal disinfection—None.

### **VENEREAL DISEASES**

#### **Regulation Number 27.**

Section 1. Notification—Physicians shall report all cases of Chancroid, Gonorrhea and Syphilis by number or name on special cards, direct to the State Board of Health.

Section 2. That such physician or other person shall immediately report to the superintendent of the State Board of Health, every self-discharged case of syphilis, gonorrhea or chancroid and every case who refuses or fails to continue proper treatment until cured.

Section 3. If reporting by office number, an identifying number or initial shall be used which refers definitely to the physician's record of the case.

Section 4. Physicians attending cases of syphilis or gonococcus infection, are expected to furnish to the health officer at the time of reporting the case, any available data regarding the source of infection, in order to assist in the control of these diseases.

Section 5. Diagnosis—The local health officer may require the submission of specimens from cases of syphilis or gonococcus infection, or cases suspected of being cases of syphilis or gonococcus infection, for the purpose of examination at the state health laboratory, or any municipal laboratory. It shall be the duty of every physician attending a case of syphilis or gonococcus infection to secure specimens for examination when required to do so by the local health officer.

Note—Examination of blood for syphilis by the Wasserman test, and microscopic examinations of smears of pus for gonococci are made without charge at the laboratories of the State Board of Health, if the specimens are properly taken and mailed in the containers furnished by the state health laboratory.

Section 6. Instructions to Patients—It shall be the duty of the physician in attendance on a person having syphilis or gonococcus infection, or suspected of having syphilis or gonococcus infection, to instruct him or her in precautionary measures for pre-

**ALWAYS USE CONCURRENT DISINFECTION**

venting the spread of the disease, the seriousness of the disease, and the necessity for prolonged treatment, and the physician shall in addition, furnish approved literature on these subjects.

Note—Approved literature for distribution to patients may be secured from the Superintendent of the State Board of Health, of South Dakota, Pierre, South Dakota.

Section 7. Health Officers Designated Inspectors—All city, county and other approved local health officers are for the purpose of the control and suppression of venereal diseases, hereby designated and appointed inspectors of the State Board of Health, of South Dakota.

Section 8. **Investigation and Control of Cases**—All city, county, and other approved local health officers are hereby directed to use every available means to ascertain the existence of and immediately investigate all reported or suspected cases of syphilis in the infectious stages and gonococcus infection within their several jurisdictions, and to ascertain the sources of such infections.

Section 9. In such investigation, said health officers are hereby vested with full powers of inspection, examination, isolation and disinfection of all persons, places and things, and as such inspectors, said local health officers are hereby directed:

(a) To make examinations of persons reasonably suspected of having syphilis or gonorrhea in the infectious stages. (Owing to the prevalence of such diseases among prostitutes, all such persons may be considered within the above class.)

(b) To isolate such persons whenever, in the opinion of said local health officer, the State Board of Health or its Superintendent, isolation is necessary to protect the public health. In establishing isolation, the health officer shall define the limits of the area in which persons reasonably suspected or known to have syphilis or gonococcus infections and his or her immediate attendant are to be isolated, and no person, other than the attending physician, shall enter or leave the area of isolation, without permission of the health officer. (See Regulation No. 5.)

(c) In cases of isolation, not to terminate said isolation until cases have become non-infectious, or until permission has been given by the State Board of Health, or its superintendent.

(Note 1. Cases of gonococcus infection are to be regarded as infectious until at least two successive smears taken not less than 48 hours apart fail to show gonococci.

Note 2. Cases of syphilis shall be regarded as infectious until all lesions of the skin or mucous membrane are completely healed.)

**ALWAYS USE CONCURRENT DISINFECTION**

(d) Inasmuch as prostitution is the most prolific source of syphilis and gonococcus infection, all health officers are directed to use every proper means of repressing same, and not to issue certificates of freedom from venereal diseases, as such certificates may be used for the purpose of solicitation.

(e) To keep all records pertaining to said inspectors and examinations in files not open to public inspection, and to make every reasonable effort to keep secret the identity of those affected by venereal disease control measures, as far as may be consistent with the protection of the public health.

Note 3. The term "approved health officer," as it appears in the foregoing regulations shall be so construed to mean any member or properly appointed representative of the State Board of Health, the superintendent and vice-president of the county board of health, and any legalized and qualified physician who shall be deputized by the superintendent of the county board of health, or properly appointed health officer appointed under the provisions of a charter or ordinance in cities of the first class.

Section 10. Report of Unusual Prevalence—When the local health officer, through investigation, becomes aware of unusual prevalence of syphilis or gonococcus infection, or of unusual local conditions favoring the spread of these diseases, he shall report the facts at once to the superintendent of the State Board of Health.

**Discharge of Carriers—Procedures to be Followed Before Discharging as Non-Infectious. (Syphilis)**

A person infected with treponema pallidum may be considered, from a public point of view, to be free from danger of transmitting the infection, when a complete clinical examination, in which special emphasis is laid on the thorough exploration of the skin and mucous membranes, particularly those of the orifices of the respiratory, gastro-intestinal and genito-urinary tracts, shows the absence of any area from which infectious matter can be disseminated.

A. When a patient is discharged as non-infectious under the above ruling, he must, of course, be plainly advised that his disease is not cured, and that although non-infectious at the time, he may subsequently become infectious to others through contact, and that the disease will probably be transmitted to his offspring until he is actually cured by a proper course of treatment carried on for a definite period. He should, therefore, be warned to remain under observation until such time as complete cure is effected.

In the light of our present knowledge, the following seem to be minimum requirements for cure:

**ALWAYS USE CONCURRENT DISINFECTION**

1. Treatment must be continuous. No rest of any kind until treatment is finished.

2. The treatment must be prolonged for a minimum of 18 months regardless of seronegativity, seropositivity at the time treatment is begun, and regardless of serologic progress during treatment.

3. For the control of infectious relapse, a minimum of 20 injections (each) of an arsphenamine and a heavy metal.

4. For the accomplishment of an individual cure a minimum of 30 injections of an arsphenamine and 40 injections of a heavy metal are desirable.

5. Lifelong post-treatment observation with periodic re-examination is essential to determine the fact of cure.

### GONORRHEA (Clap)

#### Males

Before discharging cases as non-infectious, the following three requirements must be met:

1. Freedom from discharge.

2. Clear urine, no shreds.

3. The pus expressed from the urethra by prostatic massage, must be negative for gonococci on four successive examinations at intervals of one week.

#### Females

1. No vaginal and urethral discharge.

2. Two successive negative examinations for gonococci of secretions of the urethra, vagina and the cervix, with an interval of 48 hours and repeated on four successive weeks.

This rule is laid as the best practical method at our disposal at present, but it is fully realized that such negative findings may not in every instance be conclusive as to freedom from infection, and the patient should be requested to return at frequent intervals for subsequent examinations. In fact, all the foregoing rules governing discharge as non-infectious are tentative and will be subject to revision should the combined experience of directors of clinics or other indicate the necessity therefor.

3. Technique for procuring smears from the cervix and urethra: Slides should be prepared for the secretions procured from the urethra and cervix, as well as from secretions which may be expressed from Skenes and Bartholins glands. In preparing urethral slides the fingers should be inserted in the vagina and ex-

**ALWAYS USE CONCURRENT DISINFECTION**

pression made on the floor of the urethra from within outward, the cotton tipped probe being then introduced well into the meatus. In procuring smears from the cervix a vaginal speculum should be introduced and the cervix well exposed. All secretions should be mopped away from the external os before taking the smear. After the cervix is well dried a probe, tightly wound with cotton, should be inserted into the cervical canal and rotated several times. It is exceedingly important that the secretion from the cervix shall be in reality cervical secretions and not mucous or pus from the vagina. It is advised that two or three slides be prepared from both urethra and cervix.

### **WHOOPING COUGH**

Observation. See Regulation No. 4.

### **YELLOW FEVER**

QUARANTINE—Wire or telephone the superintendent of the State Board of Health for special instructions.

### **PROTECTING THE HEALTH OF SCHOOL CHILDREN**

#### **Regulation Number 28.**

Section 1. The local board of health of every city or village shall require every teacher to report each morning to the head of the school, the case of every child belonging to his or her room who shows signs of being in ill health or suffering from a communicable disease; also every child returning to school after an absence on account of illness of unknown cause. The head of the school, on receiving such a report, shall as soon as possible thereafter notify the local health officer. Whenever in the opinion of the head of the school, a child's condition requires that he or she be sent home, or whenever a child shows symptoms of smallpox, scarlet fever, diphtheria, measles, chicken-pox, tuberculosis, influenza, tonsilitis, erysipelas, whooping-cough, mumps, itch, trachoma, ringworm, head or body lice or such other condition or conditions as affect the comfort and well-being of the school, he or she shall send such suspect home immediately or as soon as a safe and proper conveyance can be found, and the local health officer shall be notified at once by the head of the school in such case.

Section 2. No principal, superintendent or teacher of a school and no parent, guardian, or master of any child or minor, having the power and authority to prevent, shall permit any such child or minor having smallpox, scarlet fever, diphtheria, measles, chicken-pox, tuberculosis, influenza, tonsilitis, erysipelas, whooping-cough, mumps, itch, ringworm, trachoma, head or body lice, or

**ALWAYS USE CONCURRENT DISINFECTION**

any other dangerous or communicable disease or any child residing in a house where any such disease exists or has recently existed, to attend any public, private or parochial school, or church or Sunday School, until the health officer of the city, village or township, or some other physician delegated by him, shall have given his permission for such attendance.

Section 3. A school house wherein a child suffering from scarlet fever, has been present, shall be deemed infected and shall be temporarily closed and thoroughly disinfected, and cleaned under the supervision of the local health officer before the re-opening of school. Such disinfection shall be done according to the direction of the State Board of Health in its circular on disinfection.

Secton 4. When it shall come to the attenton of the health officer by complaint or otherwise, that a school premises be in an insanitary condition, and he finds that existing conditions warrant, he shall forthwith order that the place be closed and kept closed until it has been repaired and properly disinfected or cleaned, or both, as the case may require.

## CHAPTER 2

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### PUBLIC HEALTH NURSING

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#### Regulation Number 29.

Section 1. General Qualifications. All nurses employed in public health nursing in the State of South Dakota shall possess all of the qualifications now or hereafter required by law for professional regularly graduated and registered trained nurses in this state. In addition they shall have the following qualifications, except when engaged in work the qualifications for which are otherwise provided by law, viz:

1. Training for at least four months in a reputable and suitable public health nursing course; or
2. Eight months of public health nursing work done on an accredited staff or under adequate supervision.

Section 2. Supervision. All public health nurses in the State of South Dakota shall be under the direction of the State Board of Health. Their work at all times shall be subject to inspection and direction by the Board or any director or supervisor that the Board may appoint or employ.

Section 3. Reports. Every public health nurse in the State of South Dakota shall keep a daily report of her work and such other records as hereinafter provided, for the files of her office, and shall make in duplicate a full confidential report at the end of each month, one to be filed in her office and one to be mailed to the Division of Public Health Nursing of the State Board of Health on or before the fifth day of the succeeding month. She shall also make a concise report and present to the County Commissioners each month.

Section 4. The public health nurse should be provided by the county in which she is working, with an office in some public or county building at the county seat, with a room in connection therewith for private conferences. She should be furnished transportation in making visits to rural communities and adjacent towns. A visiting nurse bag supplied with necessary equipment should be furnished.

Note—Blanks and cards for keeping an office record of the work done by the nurses and for reports will be furnished by the office of the State Board of Health that a uniformity of records and reports may be maintained throughout the state.

Hours on duty shall comply with the hours of the county officials with one half day off per week. If it becomes necessary to do any night work, she shall take time off the following day.

**CHARACTER AND SCOPE OF WORK**

Section 5. The scope and general extent of the activities of public health nursing are classified under the following seven general heads:

1. Maternal and Child Health
2. Tuberculosis
3. Crippled Children
4. School Hygiene
5. Education
6. Home Care of the Sick
7. Social work in cooperation with other workers.

**School Hygiene**

Section 6. The results to be obtained from the work of the public health nurse in schools depend largely upon the cooperation of the teacher. Therefore, all teachers in the schools of this state should recognize the responsibility evolving upon them and at all times and under all circumstances cooperate with the nurses.

(a) Preliminary Inspection—The nurse shall instruct the teachers in the inspection of children's hands, face, eyes and throat in order to detect any communicable conditions or disease that might occur, noting particularly red, watery eyes, and discharging noses or ears, inflamed throat, flushed cheek or sealing of the hand; this inspection to be given following vacation or absence from school. If the teacher detects any symptoms suspicious of contagious, communicable disease or condition detrimental to the health or comfort of the pupils, the child should be sent home temporarily, and if the teacher considers it necessary, she shall call the nurse, who must visit the home or school at her earliest convenience.

(b) Daily Inspection—The teacher shall be instructed to watch each pupil for signs of sickness. If a child has been out sick with a suspected contagious disease, or parasitic condition, a note from a physician or the nurse must be required before readmitting the child.

(c) Exclusion—If the nurse or teacher sends any child home from school, a note is sent to the parents, and if the case is suspicious of contagious or parasitic condition, notice is also to be sent to the health officer. All pupils found in school suffering from symptoms of contagious disease or communicable diseases or conditions shall be excluded.

Section 7. Some inspection of the school children shall be done each year according to the plan laid out by the director of the division. Any teacher who has a particular case she wishes

inspected, shall communicate with the nurse as soon as possible. The information gathered from such inspection is for the benefit of the pupil and the parents. The nurse shall discuss the physical conditions of such child with the parents and teacher; but the defects of the child are strictly confidential and shall be treated as such.

Section 8. Routine Inspection—The nurse shall inspect all school children in regard to personal hygiene and give lessons and demonstrations on this work. When teachers have any special cases for the nurse to observe, any information given in connection therewith shall be treated as strictly confidential.

Section 9. First Aid—The nurse shall carry with her in her nurse's bag, full "first aid" supplies and render assistance in any emergency case; such supplies to be furnished by the county or city where employed. Each school should be provided with a first aid cabinet, and the nurse shall instruct the pupils relative to first aid methods.

Section 10. Sanitation—All questions of heating, lighting and ventilation in the schools shall be under observation of the nurse. The water supply and toilets shall be regularly inspected and where corrections are needed, the matter should be referred to the Department of Sanitary Engineering of the State Board of Health, and to the school authorities.

#### **Education Hygiene and Home Care of the Sick**

Section 11. ((a) Communicable Disease—All cases of suspected communicable disease found in the nurse's work are to be reported to the superintendent of the county board of health.

(b) Home calls on sick children. The nurse shall visit children out of school, particularly when they may not be able in the home to furnish proper nursing care.

(c) Home Calls—Physical Defects—Follow up work or physical defects found in school children will make up much of the summer work of the nurse.

(d) Home Nursing—The nurse shall assist in finding the source of illness and instruct the members of the family in methods of caring for the sick. Many up-to-date methods of nursing may be adopted in the home with a little instruction. In case of any contagious or communicable disease or condition the nurse shall instruct the attendants in the proper methods of precaution.

All county cases shall be given special attention by the nurse, when in the judgment of the county health officer, it is necessary.

**Special Attention Given to Tuberculosis**

Section 12. (a) The nurse shall at all times be alert to discover symptoms which indicate tuberculosis and promptly investigate reported, suspected cases.

(b) Upon discovering symptoms of tuberculosis in any family, the nurse shall forthwith submit to the superintendent of the county board of health, the full name, residence and hygienic data on blanks furnished by the State Board of Health, for that purpose, of every such suspect.

(c) The nurse shall give special attention to well defined or developed cases, giving specific instructions for the disposition of sputum or other infectious bodily excretion or secretion in such manner as to avoid danger to any person or persons.

(d) Tuberculosis homes must be visited often for the purpose of inspection, instruction and assistance in preventative measures.

**Social Work in the Community**

Section 13. (a) Campaigns—The nurse shall assist, and if desired, direct in organizing clean-up campaigns, insect exterminating campaigns and child welfare programs. She shall be on the lookout for and promptly report to the superintendent of the county board of health any insanitary conditions. For the County Fair, and such other occasions as may seem practicable, she shall plan and collect exhibits that will help demonstrate health work and health conditions.

(b) Public Meetings—The nurse shall keep in touch with all clubs and other organizations of her county that bring the home and the school, the parent and the teacher in closer relation. She shall give demonstrations for public welfare clubs and allied organizations on such subjects as home nursing, care of children, proper food, etc. Talks shall be given at Mothers' Meetings, before public welfare clubs and wherever there is opportunity for helpful work.

(c) Cooperation—The nurse shall cooperate with the health officer and other physicians, dentists, hospitals, county commissioners, and other agencies in every way possible.

(d) Where possible the nurse shall refer child welfare cases to the proper agency and cooperate with them in every way.

(e) The nurse in her work should make it understood that public health work is for all people.

## CHAPTER 3

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### DIVISION OF LABORATORIES

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#### **Regulation Number 30.**

Section 1. The Director of the Division of Laboratories shall make or cause to be made, without delay, all laboratory investigations, analyses, tests, etc., as shall be required by the State Board of Health or any of the members of the several county boards of health, of any material of any description that may be furnished him for the express purposes of determining all matters affecting the public health.

Section 2. All examinations directly concerning the diagnosis or control of communicable disease of men in the State of South Dakota shall be made free of charge to the physicians of this state.

Section 3. A nominal fee may be charged for making examinations not directly concerning the diagnosis or control of communicable disease. Such examinations include procedures for tissue diagnosis, gastric analysis, hematologic studies, blood chemistry, urinalysis and tests for pregnancy.

Section 4. No report shall be rendered or examination undertaken when full data is not given; or when the name or address of the patient is not given; or when palpably fictitious name or address or both are given, except when venereal infection is suspected, in which case the patient's initials, date of birth and address may be used for identifying the specimen.

Section 5. At the discretion of the Director of the Division of Laboratories, no report shall be rendered or examination undertaken for which a fee is charged, when not accompanied by the proper fee, or when the fee is not promptly remitted upon notification; or when previous work remains unpaid.

Section 6. Examination of all specimens of whatever nature submitted from inmates of state institutions by the proper authorities shall be made free of charge.

Section 7. No mailing outfits shall be sent to physicians or institutions or other parties, when outfits previously sent have not been returned promptly, or satisfactorily accounted for, or when such outfits have been used for private purposes.

Section 8. No further outfits shall be sent when charges on those previously sent have not been paid or prepaid charges have not been promptly refunded.

Section 9. No specimen received in a container other than those supplied by the Division of Laboratories, or any specimen not prepared in accordance with the directions furnished need be examined except at the option of the Director of the Division of Laboratories.

Section 10. Approval of laboratories to make examinations for the issuance of premarital or prenatal certificates, as required by law, or for release of persons quarantined for diphtheria or isolated for typhoid fever shall be granted on an annual basis. Laboratories applying for such approval must demonstrate satisfactory compliance with the requirements set up by the Division of Laboratories as to personnel, quarters, equipment and ability to perform the laboratory examinations according to the methods stated in the "Current Standard Procedures" set up by said Division. Furthermore, the parties responsible for the operation of such laboratories must agree to abide by whatever regulations are found necessary to maintain a reliable grade of performance and a uniform system of reporting results. The report of any laboratory not having the approval of the State Board of Health through its Division of Laboratories may not be used for the release of any individual from quarantine for diphtheria or isolation for typhoid fever.

Section 11. In the event of any dispute arising as to the propriety of an examination to be undertaken by the laboratories of the State Board of Health, the ruling of the Director of the Division of Laboratories shall hold until the question is settled by the State **Board of Health.**

Section 12. In any emergency not covered by the foregoing regulations, the ruling of the Director of the Division of Laboratories shall hold until the State Board of Health shall make a final ruling.

## CHAPTER 4

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### STATE MEDICAL EXAMINATIONS

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#### **Regulation Number 31.**

Section 1. No person shall practice medicine in the State of South Dakota unless he shall have made application to the State Board of Health through the Director of the Division of Medical Licensure thereof, upon such forms and in such manner as shall be adopted and prescribed by said Board, and shall have obtained from said Board, and possess in full force and virtue, a valid license to do so. (Note: An applicant must present a certificate indicating that he has fulfilled the requirements of the Basic Science Act, Chapter 104, Session Laws of 1939.)

Section 2. Each applicant for license must be a citizen of the United States (or shall have declared his intention of becoming a citizen. Section 27.0301, 1939 Code) and must make an affidavit setting forth his age, place of residence, preliminary education, time and place of each course of medical lectures, and date of graduation. Blank forms can be secured from the Director. The affidavit must be corroborated by the exhibition of his diploma, and he must also furnish a certificate of good moral character signed by two reputable physicians who are personally acquainted with him. He must also furnish with his application an unmounted photograph of himself taken within the preceding year, on the back of which shall appear the applicant's signature, signed in the presence of the two physicians who will certify under the signature, that the person whose name appears above is personally known to them to be the person shown in the photograph and that the signature was written in their presence and that he is the person they recommended in the "certificate of good moral character." Applicant shall certify that the photograph is a true likeness of himself. The photograph shall remain the property of the Board.

Section 3. A fee of twenty dollars (\$20.00) must accompany each application. No portion of this fee is returned in case of failure.

Section 4. All applicants for examination for license to practise medicine in this state who matriculated in a medical college subsequent to 1911, must as a prerequisite thereto present satisfactory evidence to said Board of preliminary education, consisting of an accredited four year high school course and in addition two years in a college of liberal arts or its equivalent.

Section 5. All applicants for examination for license to practise medicine in this state who matriculated subsequent to 1908 and prior to 1911, must present satisfactory evidence of a four-

year course in an accredited high school, and in addition one year in a college of liberal arts or its equivalent.

Section 6. Each applicant, if he graduated after January 1, 1905, or completed his course of lectures after January 1, 1905, must show proof that he has attended four full courses of lectures after at least eight months each year at a recognized medical college.

Section 7. Each applicant, if he graduated prior to January 1, 1905, must show proof of having attended three full courses of at least six months (no two courses being in the same year) each at a recognized medical college.

Section 8. On and after January 1, 1925, the State Board will recognize as reputable medical colleges, only those colleges classified and recognized as Class A by the Council on Medical Education and Hospitals of the American Medical Association. A diploma presented by a graduate of a foreign medical college shall not be accepted by the Board of Medical Examiners unless accompanied by a statement from the Council on Medical Education and Hospitals of the American Medical Association certifying that, when such diploma was issued, the standards of such foreign medical college were equivalent to the standards for a Class A medical school as defined by said Council.

Section 9. Hospital Internship—Applicants for license who graduated after January 1, 1925, must present a certificate showing that he has served not less than one year as intern in a thoroughly equipped standard hospital. Applicants who graduated prior to January 1, 1925, may offer two years active practice, acquired prior to that date, in lieu of the internship.

Section 10. Regular examinations will be held at 9 A. M. on the third Tuesday in January and July of each year at such places as the Board may designate. Examinations shall be written, oral and practical, must be conducted in the English language and shall include the following subjects: Anatomy, embryology, histology, physiology, chemistry, pathology, therapeutics, practice of medicine, surgery, obstetrics, gynecology, diseases of the eye, ear, nose and throat, bacteriology, medical jurisprudence, skin, genito-urinary and venereal diseases, hygiene and sanitation and practical laboratory work in chemistry, urinalysis, bacteriology and pathology, and such other branches as the Board may deem advisable.

Section 11. Candidates are not permitted to communicate with each other in any manner whatever, during the examination; to consult notes or books or use any dishonest or unfair means of securing or imparting information. Any candidate who disregards this rule will be debarred from further examination.

Section 12. Each candidate will be required to appear in person before the Board for identification and at the same time must present his diploma for verification. A legible photographic copy of the diploma may be presented in lieu of the diploma.

Section 13. A general average of seventy-five per cent and not less than sixty percent in any subject must be attained in order to secure a license.

Section 14. Each applicant is known by his number which is arranged as follows: Envelopes are numbered and each contains a blank card bearing the corresponding number on which the applicant writes his name, address and year of graduation. The completed blank is returned to the envelope and the envelope is sealed by himself.

Section 15. Each applicant will place upon his answer paper, the number given him, the year of his graduation and the subject upon which he is writing. No other marks of identification must appear, if so, said papers will be discarded and no credit given for the answers thereon.

Section 16. All applications for license, together with the fee for same, must be in the hands of the Director on or before the first day of January or July. No applicant need appear for examination who has not fulfilled this requirement.

Section 17. Any applicant who appears at the examination hall under the influence of alcohol will not be examined.

### **Reciprocity**

As a basis for establishing reciprocal relations with other states, the South Dakota State Board of Health adopted qualification No. 1, as outlined by the American Federation of Reciprocating, Examining, and Licensing Medical Boards, viz:

Section 18. That a certificate of registration showing that an examination has been made by the proper board of any state, on which an average grade of not less than seventy-five per cent and not less than sixty percent in any subject was awarded, the holder thereof having been at the time of said examination a legal possessor of a diploma from a medical school or college recognized and in good standing in the state where reciprocal registration is sought, may be accepted in lieu of examination, as evidence of qualification. Provided, that in case the scope of said examination was less than that prescribed by the state in which registration is sought, the applicant may require to submit to a supplemental examination by the board thereof in such subjects as have not been covered. And provided further, that the applicant shall have been reputably engaged in the practice of medicine in the state from

which he seeks reciprocity for at least one year subsequent to receiving the license upon which registration in this state is sought.

A physician duly authorized to practice medicine and surgery in another state, who wishes to remove from such state and reside and practice his profession in this state, and who seeks reciprocal endorsement from this Board under qualification No. 1:

(a) Shall make an application on a form prescribed by this Board and pay a fee of \$50.00.

(b) Present a certificate or license issued after examination by the medical board of such state.

(c) Appear in person before the Board for identification not later than the first day of the regular examination.

(d) Must have been engaged in the practice of his profession in the state from which he seeks reciprocal endorsement at least one year.

(e) The blank form prescribed and furnished him by this Board must be properly completed in every respect and together with the fee of \$50.00 and a properly certified photograph, as directed in Regulation No. 224, returned to the director on or before the first day of January or July.

(f) Reciprocates coming from other states which do not require the practical examination in laboratory work and the clinical and oral examinations must take them as supplemental before this Board.

(g) Applications for reciprocal endorsement cannot be acted upon except at regular meetings.

(h) Graduates of 1905 and thereafter must have a minimum entrance requirement of graduation from a four year accredited high school or its equivalent.

(i) Graduates of 1912 and thereafter must have the preliminary requirements as previously outlined.

(j) Graduates of 1925 and thereafter must be from a Class A medical college and must show hospital internship as outlined in Section 9.

(k) No applicant who has failed at an examination conducted by the South Dakota State Board of Health is eligible to a license through reciprocity.

(l) Only those licensed through examination are eligible for a license through reciprocity. A license or certificate issued in another state through reciprocity is not acceptable for reciprocal registration in South Dakota. (Note: All applicants for reciprocal endorsement must present the certificate of the South Dakota

State Board of Examiners in the basic sciences or a certificate of proficiency in the basic sciences endorsed by said Board. Chapter 104, Session Laws of 1939.)

Section 19. No medical college which accepts or graduates students without meeting the requirements relating to the preliminary education as a prerequisite to medical education will be considered in good standing by this Board. All medical schools and colleges are requested to advise their students of the educational requirements of this state. Copies of the medical practice act and rules and regulations regarding examinations of candidates for license to practice medicine in this state may be secured by addressing the Director of Medical Licensure, State Board of Health.

#### **Duplicate License**

Section 20. In all cases where a duly qualified and legally licensed practitioner in the State of South Dakota shall make application to the State Board of Health and Medical Examiners for a duplicate certificate of license, where the original has been destroyed by fire or other sufficient reason, he shall make application accompanied by a proper affidavit setting forth the facts as they may be, together with a cost deposit of \$5.00. The Superintendent of the State Board of Health shall procure the duplicate certificate of license and forward same to the applicant together with such amount remaining from the deposit which has not been actually expended in procuring said duplication.

## CHAPTER 5

### VITAL STATISTICS

#### **Regulation Number 32.**

Section 1. All of the items on any certificates of birth, stillbirth, and death duly adopted by the State Board of Health are hereby declared necessary for the legal, social and sanitary purposes served by the registration records and all such items shall be completed by the informant.

The personal and statistical particulars shall be authenticated by the signature of the informant, who may be any competent person acquainted with the facts.

Section 2. The statement of facts relating to the disposition of a dead body shall be signed by the undertaker or person acting as such.

Section 3. In cases where the Director of Vital Statistics shall ascertain that the original return or primary certificate of birth or death is incomplete or incorrect, he shall enter on the back of such return or certificate or on a paper attached thereto a correct statement of the omitted or incorrect item or items together with the name and address of each person furnishing the information, upon which such statement is based. Such statement shall be dated and signed by said Director and shall from its date be and constitute a part of the primary certificate to which it is attached.

Section 4. A fetus showing no evidence of life after complete birth, (no action of heart, breathing, or movement of voluntary muscle,) if the twentieth week of gestation has been reached, should be registered as a stillbirth.

Section 5. The stillbirth certificate shall take the place of the birth and death certificate, and is to be recorded as one record; these records to be recorded in the same volume provided for birth records.

Section 6. The physician shall prepare the medical part of the certificate of stillbirth on the standard form, furnished by the State Board of Health. He shall then transmit to the funeral director, or person in charge of disposal, or file personally the completed certificate with the local registrar of the district in which the stillbirth occurred. The completed certificate must be filed within three days after the stillbirth occurs.

#### **Illegitimate Births**

Section 1. In no event should a birth certificate of an illegitimate child show the name of any person claimed or alleged to be the father of an illegitimate child, unless the paternity has been

established by a court order and the court order filed with the certificate; or by an affidavit of the father, admitting parentage.

#### **Instructions for Filing Birth or Genealogical Records**

(Sections 27.0215 and 27.0216)

Section 1. The form to be used for recording a birth occurring in South Dakota prior to July 1, 1905, and not subsequently filed, is to be supplied by the State Board of Health in Pierre, South Dakota.

Section 2. (1) Write plainly. Use ink or typewriter.

(2) All facts are to be given as they were at the time of birth. Certification must be made as required by law.

(3) Such form shall be a legal record and shall be permanently filed.

Section 3. Certification of facts is to be made by one of the following means:

(1) Certification and signature of attending physician. No affidavit required.

(2) By affidavit of a parent (father or mother).

(3) By affidavit of person who was at least ten years old at the time this birth occurred, and who had actual knowledge of the facts at the time the birth occurred.

(4) If qualified persons are not available to make affidavits, certification may be made from the following documents:

1. Original baptismal records.

2. Original family Bible records. Recent entries on copies not acceptable.

3. Insurance policies of more than five years' standing (not necessarily now in force).

4. Military or civil service records.

5. Old employment records, if age is shown.

6. Old licenses of any sort showing age at time of issuance.

7. Legal documents of any sort showing age.

8. Original birth certificate or certified copy, of children of applicant, showing age of parents.

9. Official school records.

10. Old birthday books, or pictures, showing original birthdate entry.

Section 4. Certification of documentary evidence may be made locally by one of the following persons:

(1) Clerk of Courts of the county where applicant is located.

(2) County Attorney of the county where applicant is located.

Section 5. A fee of one dollar (\$1.00) payable in advance is required for each certified copy.

## CHAPTER 6

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### EMBALMING

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#### **Embalmers**

#### **Disposal of the Dead**

#### **Embalming Fluid**

#### **Transportation of the Dead**

#### **Corpses**

#### **Regulation Number 33.**

Section 1. Only licensed embalmers shall be permitted to take charge of the remains of one who has died of smallpox, scarlet fever, diphtheria, or other dangerous communicable disease. Such remains must be properly disinfected and inclosed in a tightly sealed coffin which shall not thereafter be opened. The funeral of such person shall be strictly private, and in the removal of the remains for burial or other purposes only such vehicle shall be employed as is authorized by the local health officer.

Section 2. The dead body of any human being must not remain unburied for a period longer than four days unless the same is to be shipped, in which event shipping must begin within this time. When death is due to any of the diseases specified in Section 1, the body must not remain unburied more than twenty-four hours unless prepared for shipment as provided under the transportation regulations.

Section 3. All shipping permits issued in South Dakota for the transportation of the remains of the dead must be signed by a licensed embalmer. A firm name must not be used in the signing of such permits unless all members of the firm are licensed embalmers.

Section 4. The shipment of the dead must be governed by the transportation regulations printed on the shipping blanks furnished by the State Board of Health.

#### **Embalming Fluid**

Section 1. In the shipment of the dead in South Dakota, not less than eight parts by weight of embalming fluid to one hundred and fifty pounds of body weight shall be used for arterial embalming.

Section 2. In addition, in any case of contagious, infectious or communicable disease, the body should be washed and all orifices plugged with an absorbent material saturated with formaldehyde solution, and not less than eight parts by weight of embalming fluid to one hundred and fifty parts of body weight shall be equally distributed by injection, one-half in the thorax and one-half in the abdominal cavity. In case of cancer, all exposed surfaces shall be

firmly bandaged with a dressing of absorbent material saturated with the same embalming fluid. Eroded surfaces and discharging sinuses shall be bandaged and dressed as directed for cancer.

Section 3. All embalming fluids sold or used in South Dakota must contain formaldehyde gas in the proportion of five per cent by weight of the gas in every hundred parts by volume of the fluid, and must not contain any ingredients that interfere with the germicidal action of the formaldehyde.

Section 4. Such embalming fluids must not contain chloral nor shall they contain arsenic, mercury, zinc or other mineral poisons.

Section 5. A list of ingredients in every embalming fluid sold or used in South Dakota must be on file in the office of the State Board of Health.

#### **Transportation of the Dead**

Rule 1. The transportation of bodies dead of smallpox or bubonic plague from one state, territory, district or province to another is absolutely prohibited.

Rule 2. The transportation of bodies dead of Asiatic cholera, yellow fever, typhus fever, diphtheria (membraneous croup), scarlet fever (scarlatina, scarlet rash), erysipelas, glanders, anthrax or leprosy, shall not be accepted for transportation unless prepared for shipment by being thoroughly disinfected by (a) arterial and cavity injection with an approved disinfecting fluid, (b) disinfection and stopping of all orifices with absorbent cotton, and (c) washing the body with disinfectant, all of which must be done by an embalmer holding a certificate as such, issued by the state or provincial board of health, or other state or provincial authority provided by law.

After being disinfected as above, such body shall be enveloped in a layer of dry cotton not less than one inch thick, completely wrapped in a sheet securely fastened, and encased in an air-tight zinc, tin, copper or lead-lined coffin or iron casket, all joints and seams hermetically sealed, and all enclosed in a strong, tight, wooden box. Or the body being prepared for shipment by disinfecting and wrapping as above, may be placed in a strong coffin or casket, and said coffin or casket in air-tight zinc, copper, or tin-lined box, all joints and seams hermetically soldered.

For interstate transportation under this rule only embalmers holding a license issued or approved by the state or provincial board of health, or other state or provincial authority provided for by law, after examination, shall be recognized as competent to prepare such bodies for shipment.

Rule 3. The bodies of those dead of typhoid fever, puerperal fever, tuberculosis or measles, may be received for transportation when prepared for shipment by arterial cavity injection with an approved disinfecting fluid, washing the exterior of the body with the same, and enveloping the entire body with a layer of cotton not less than one inch thick, and all wrapped in a sheet securely fastened, and encased in an air-tight metallic coffin or casket, or air-tight metal lined box, provided that this shall apply only to bodies which can reach their destination within thirty hours from the time of death. In all other cases, such bodies shall be prepared by a licensed embalmer holding a certificate as provided in Rule 2. When prepared by a licensed embalmer as defined and directed in Rule 2, the air-tight sealing and bandaging with cotton may be dispensed with.

Rule 4. The bodies of those dead from any case not stated in Rules 2 and 3 may be received for transportation when encased in a sound coffin or casket and enclosed in a strong outside wooden box, provided they can reach their destination within thirty hours from the time of death. If the body cannot reach its destination within thirty hours from time of death, it must be prepared for shipment by arterial and cavity injection with an approved disinfecting fluid, washing the exterior of the body with the same, and enveloping the entire body with a layer of dry cotton not less than one inch thick, and all wrapped in a sheet securely fastened, and encased in an air-tight metallic coffin or casket or an air-tight metal lined box. But when the body has been prepared for shipment by being thoroughly disinfected by a licensed embalmer, as defined and directed in Rule 2, the air tight sealing and bandaging with cotton may be dispensed with.

Rule 5. In the shipment of bodies dead from any disease named in Rule 2, such body must not be accompanied by persons or articles which have been exposed to the infection of the disease, unless certified by the health officer as having been properly disinfected.

Before selling tickets, agents should carefully examine the transit permit and note the name of the passenger in charge and of any other proposing to accompany the body, and see that all necessary precautions have been taken to prevent the spread of the disease. The transit permit in such cases shall specifically state who is authorized by the health authorities to accompany the remains. In all cases where bodies are forwarded under Rule 2, notice must be sent by telegraph, by the shipping embalmer to the health officer, or when there is no health officer, to other competent authority at destination, advising the date and train on which the body may be expected.

Rule 6. Every dead body must be accompanied by a person in charge, who must be provided with a passage ticket and also present a full first class ticket marked "Corpse" for the transportation of the body, and a transit permit showing physician's or coroner's certificate, name of deceased, date and hour of death, age, place of death, cause of death and all other items of the standard certificate of death recommended by the American Public Health Association and adopted by the United States Census Bureau, as far as obtainable, including health officer's or registrar's permit for removal, whether a communicable or non-communicable disease, the point to which the body is to be shipped, and when death is caused by any form of the diseases specified in Rule 2, the names of those authorized by the health authorities to accompany the body. Also the undertaker's certificate as to how the body was prepared for shipment. The transit permit must be made in duplicate, and the signature of physician or coroner, health officer and undertaker must be on both the original and duplicate copies. The undertaker's or registrar's certificate and pasteur of the original shall be detached from the transit permit and securely fastened on the end of the coffin box. All coffin boxes must be provided with at least four handles. The physician's certificate and transit permit shall be handed to the passenger in charge of the corpse. The whole duplicate copy shall be sent to the official in charge of the baggage department of the initial line, and by him to the secretary of state or provincial board of health of the state or province from which said shipment is made.

Rule 7. When bodies are shipped by express, a transit permit, as described in Rule 6, must be made out in duplicate. The undertaker's certificate and pasteur of the original shall be detached from the transit permit and securely fastened on the coffin box. The physician's certificate and transit permit shall be attached to and accompany the express way-bill covering the remains, and be delivered with the body at the point of destination to the person to whom it is consigned. The whole duplicate copy shall be sent by the forwarding express agent to the secretary of the state or provincial board of health of the state or province from which said shipment was made.

Rule 8. Every disinterred body dead from any disease or cause, shall be treated as infectious or dangerous to the public health, and shall not be accepted for transportation unless said removal has been approved by the state or provincial health authorities having jurisdiction where such body is disinterred, and the consent of the health authorities of the locality to which the corpse is consigned has first been obtained, and all such disinterred remains, or the coffin or casket containing the same, must be wrapped in a woolen blanket thoroughly saturated with a

1-1000 solution of corrosive sublimate and enclosed in a hermetically soldered zinc, tin or copper-lined box. But bodies deposited in receiving vaults shall not be treated and considered the same as burial bodies, when originally prepared by a licensed embalmer as defined in Rule 2 and as directed in Rules 2 or 3 (according to the nature of the disease causing death), provided shipment takes place within thirty days from the time of death. The shipment of bodies prepared in the manner above directed by licensed embalmers from receiving vaults may be made within thirty days from the time of death without having to obtain permission from the health authorities of the locality to which the body is consigned. After thirty days the casket or coffin box containing said body must be enclosed in a hermetically soldered box.

Rule 9. All rules and parts of rules conflicting with these rules are hereby repealed.

#### Corpses

Rule 21. (a) A corpse will be checked under an "Excess Baggage Check" endorsed "Corpse," and showing form and number of ticket, and transported in baggage service provided a first-class adult ticket, limited or unlimited, is presented and that portion thereof reading to destination of check surrendered to the checking baggage agent, who will transmit same with his report to the Accounting Department of his company: also provided the corpse be accompanied in the same train by an escort. Minimum fare for one way ticket for any corpse is \$1.00.

(b) A corpse will be accepted for transportation only in presentation of legal form of transit permit, properly filled out and signed, showing that the body had been prepared for shipment in accordance with the law.

(c) A corpse will be checked only upon presentation of a regular one-way first-class ticket or the return portion of a first-class adult round-trip ticket.

Exception—The return portion of a half-fare ticket originally issued for the transportation of a child, when presented together with one additional half-fare ticket, will be honored for the checking of a corpse of a child.

The contract and each coupon of a ticket presented for the transportation of a corpse must bear the word "Corpse" written or stamped with ink.

(d) A corpse will not be checked beyond a station at which a wagon transfer is required, except where special authority is given. The escort of the corpse will be required to make arrangements for such transfer.

(e) When a corpse is checked to a non-agency station, the carriers assume no responsibility for the care of the corpse at such destination.

(f) Each corpse box (having not less than six handles) must be plainly marked, showing name of deceased, destination, route and to whom consigned.

(g) Escort will be required to present a separate ticket for his own transportation; contract and each coupon of ticket to be marked "Corpse Escort. Excess Check Form..... No....."

(h) Baggage of the deceased may be checked upon presentation of the corpse ticket in accordance with the rules and regulations herein contained governing the transportation of baggage of a passenger.

(i) A corpse will not be accepted or transported if it is offensive or if fluids are escaping from the case, notwithstanding the presentation of permits or certificates.

(j) When a casket and dead body presented for shipment in baggage service weighs more than 500 pounds, the excess weight will be charged for at current excess baggage rates.

## CHAPTER 7

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### COUNTY BOARDS OF HEALTH

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#### Regulation Number 34.

Section 1. The responsibility of placing quarantine and isolation shall rest solely with the health officer, who must satisfy himself of the existence of the disease in question before enforcing regulations governing the particular disease.

Section 2. The superintendent of the County board of health shall keep a record of all transactions with which they are officially concerned. He shall keep a complete record of all cases of communicable diseases reported within his jurisdiction. Said record shall include the name of the disease, name of patient, age, sex, color, and address and location, probable source of infection measures taken for the prevention and spread, attending physician and nurse, together with date quarantine or isolation was ordered, date released, date disinfected, name of person who disinfected the premises, termination of the case, whether death or recovery, and such other information as may seem necessary under the heading of "Remarks."

Section 3. The superintendent of the county board of health, or the acting superintendent, shall furnish to the superintendent of the State Board of Health information on all matters pertaining to public health that he may desire; he shall also report the existence of diseases occurring within his jurisdiction on the same day such reports are received by him; and he shall also enforce the provisions of the rules and regulations of the State Board of Health within his jurisdiction.

Section 4. The several county health officers shall make quarterly reports to the State Board of Health as to the general sanitary conditions of their counties, such reports bearing especially upon matters relating to communicable disease. Special attention must be given to the reporting of rabies and glanders.

Section 5. The several county health officers shall keep close watch over apparent epidemic and endemic diseases existing within their jurisdictions and if a question arises as to the proper care of such disease, they shall notify the superintendent of the Board of Health in order that an investigation may be made.

Section 6. The several county health officers shall note the

conditions of slaughter houses, rendering establishments, starch factories and paper mills within their jurisdiction, and shall report such conditions to the superintendent of the State Board of Health from time to time as necessary, or upon request of said superintendent.

Section 7. The county board of health shall at all times bring to the attention of the State Board of Health any conditions which they deem in need of sanitary regulation.

Section 8. The county health officers shall, when called by the State Board of Health, assemble to discuss general sanitary problems and to present at such conferences the special sanitary needs of their individual districts.

Section 9. County Health officers shall make such investigations and reports, and obey such directions relating to sanitary problems, as shall be prescribed from time to time by the State Board of Health.

Section 10. Upon application of not less than five health officers, the superintendent of the State Board of Health shall call a special conference to discuss special or local sanitary problems, the time and place of meeting to be determined by the superintendent of the State Board of Health.

## CHAPTER 8

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### WATER SUPPLY, GARBAGE AND SEWAGE DISPOSAL

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#### Municipal Water Supply and Sewage Disposal

##### Cesspools and Privies

##### Garbage

##### Creamery Wastes

##### Water and Ice Supplied by Common Carriers

#### Regulation Number 35.

Section 1. No person, company, corporation, private or public institution or municipality, shall install or materially alter or extend, for public use, any system of water supply, water purification, sewerage or sewage, garbage or refuse disposal until complete plans and specifications for such installation, alteration or extension, together with such information as the State Board of Health may require, submitted in duplicate, have been approved by the State Board of Health insofar as their sanitary features are concerned. All works shall be constructed in accordance with the plans as finally approved.

Section 2. Whenever it shall be determined that there should be any material change in the plans, construction or operation of any such system, a detailed statement of such contemplated change, together with the reasons therefor, shall be submitted in duplicate to the State Board of Health, before such change, or any contract for the making of such change is made, and then such change shall be made only after the approval as to all matters likely to affect the public health, has been given by the State Board of Health.

No such system or alteration or extension thereof shall be placed in use until after final inspection and approval by the State Board of Health.

#### Cesspools and Privies

#### Regulation Number 36.

Section 1. In cities, towns and villages, incorporated or unincorporated, all human excreta shall be disposed in a municipal sewerage system, individual septic tanks and subsurface filtration system, or privy vaults. In certain instances the construction of cesspools may be approved providing an inspection shows said construction will in no way affect the potability of any source of water supply.

Section 2. Individual septic tanks, filtration systems, and privies shall be constructed in accordance with plans and specifications approved by the State Board of Health.

**Section 3. Definitions.**

The term septic tank shall mean a tank wherein the sewerage is retained for a sufficient time to permit the precipitation of the settleable solids and the decomposition of these solids by bacterial action.

The term subsurface filtration system shall mean a system of distributing pipe with appurtenances which will enable the effluent from the septic tank to be distributed beneath the surface of the ground where bacterial action will further purify said sewage.

The term privy shall mean any building and receptacle used or intended to be used for the reception of human excreta which is not connected with a sewer system.

The term privy vault shall mean the pit beneath the privy building in which is received human excreta and which is not connected with a sewer system.

The term cesspool shall mean a pit into which household sewage or other liquid waste is discharged and from which the liquid reaches into the surrounding soil, or is otherwise removed.

Section 4. Cesspools and privy vaults shall be made fly proof, and whenever the contents reach within two feet of the ground surface, must be cleaned out to the bottom and at such other times as may seem necessary by the health officer shall be thoroughly emptied and cleaned.

Section 5. No part of the contents of any privy, cesspool, or septic tank shall be discharged onto the surface of the ground nor shall the same be transported through or over any streets or highways, except as the same shall be placed into, and transported by means of, some covered container so as to prevent the contents from being agitated or exposed to the air during the process of such transportation. Final disposal of such contents from the covered container shall be by burial under at least one foot of earth.

Section 6. No abandoned well or deep well shall be used for sewage or as a receptacle for household waste.

Section 7. No privy, vault, cesspool, septic tank, or subsurface filter, except it be water tight, shall be established in water bearing strata.

Section 8. Cesspools, privy vaults, septic tanks and subsurface filters shall be so located as to remove all possibility of pollution from the same entering any well. The horizontal distance from any such source of contamination to a source of water supply shall not be less than 50 feet but this distance shall be used only where ideal conditions indicate it to be sufficient.

Section 9. No cesspool, sink drain, or septic tank shall drain

onto the surface of the ground, into abandoned wells or into creviced strata reaching a water bearing stratum except in certain instances the effluent from a septic tank and subsurface system may be so discharged if the same is discharged in sufficient isolation to prevent the creation of a nuisance or a menace to the health and in any case the pollution of any source of water supply must be avoided.

Section 10. All regulations in conflict with this regulation are hereby repealed.

#### **Garbage**

##### **Regulation Number 37.**

No person shall maintain in any city, town or village any horse or cow stable, garbage pile, dumping ground or other place in such a manner that it will afford a breeding place for flies. All manure, garbage and other forms of waste shall be kept in closed bins in such a manner as to prevent the breeding of flies or else removed twice a week during the months of April to October, inclusive.

#### **Creamery Wastes**

##### **Regulation Number 38.**

Creamery waste or washings must not be discharged upon the surface of the ground or upon places where it will remain during the process of decomposition, or into a slough, pond, lake or other body of stagnant or standing water.

## CHAPTER 9

### BUILDING SANITATION

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#### Construction of Buildings

#### Maternity Homes

#### Homes for the Care of Infants

#### Regulation Number 39.

Whenever it is proposed to build any school, hospital, alms-house, prison, or other public institution, the plans and specifications for same in respect to sanitary conditions shall be submitted to and filed with the State Board of Health, and no such building shall be constructed until the sanitary arrangements of the same have been approved by said board.

#### Rules and Regulations for the Government of Maternity Homes

#### Regulation Number 41.

Section 1. All rooms used for maternity patients shall be outside rooms and shall contain such air space as shall be deemed by the State Board of Health to be sufficient for the number of women and children to be cared for therein.

Section 2. The window space in each room shall not be less than one-fifth of the floor space, with proper facilities for protecting infants' eyes from strong light.

Section 3. The heating of all rooms shall be of sanitary type and sufficient to maintain the temperature at 68 degrees Fahrenheit in severe weather. In case a house is heated by a hot air system, the furnace shall be so arranged as to draw cold air from out-of-doors.

Section 4. The flooring and walls shall be in good condition and of such material as will permit thorough and easy cleaning. All parts of the house shall be kept in a cleanly condition.

Section 5. The water supply shall be from a source approved by the State Board of Health. The plumbing and drainage or other arrangement for the disposal of excreta and household waste shall be in accordance with good sanitary practice, subject to the approval of the State Board of Health.

Section 6. All maternity homes having a capacity for five or more patients shall be provided with a room to be used for the delivery of patients and for no other purpose; shall be provided with proper equipment for caring for premature infants; and shall employ at least one registered nurse.

Section 7. Proper dressings for emergencies, clean bedding, body linen and towels shall be kept on hand in sufficient quantity. Means for sterilizing instruments and dressings shall be provided.

Section 8. In each confinement case, at the expected time of confinement, a legally qualified physician shall be promptly notified and shall be present and in attendance at the time of birth.

Section 9. An efficient prophylactic shall be used in the eyes of each infant at the time of birth as provided by law.

Section 10. After the birth of a child a legally qualified physician shall be in attendance upon the mother and child and shall conduct the after treatment.

Section 11. Diapers shall be supplied, in sufficient quantity to permit the use of a freshly laundered one each time the child is changed. Immediately after removing, diapers shall be placed in a covered receptacle under a disinfecting solution and shall be washed and boiled within twenty-four hours after soiling.

Section 12. If a child is kept in a maternity home and is not breast fed by its mother, the feeding and selection of food shall be under the direction of a legally qualified physician who shall state in writing on the baby's record, the reasons for using artificial feeding. No wet nurse may be provided except with the approval of the attending physician. In every case where the mother is in proper condition to nurse her child, she shall be urged to do so.

Section 13. When infants are artificially fed, bottles, stoppers and nipples shall be properly sterilized after each use. Under no circumstances may the long tube bottles be used.

Section 14. Any person in a maternity home found to be suffering from a venereal or other communicable disease shall be properly isolated in a separate room and all necessary precautions taken to prevent the spread of the disease to other persons.

Section 15. The licensee or owner of a maternity home shall not be permitted to advertise that he or she will adopt children or to hold out inducements to mothers to part with their children. Mothers shall be encouraged to keep their children.

Section 16. In case a mother will not take her child away, a release or surrender, acknowledged before a probate judge, or a registrar in his court, shall be executed by the mother and filed with the licensee of the maternity home before the mother shall be permitted to leave.

Section 17. Before any child is given for adoption, a Wasserman test on its blood shall be made at the State Health Laboratory at Vermillion, and a copy of the findings given to the prospective foster parents.

Section 18. After every confinement case all bed linen, including sheets, pillow cases, counterpane or bed spread, mattress pad and cotton blankets, shall be washed and boiled. All wool blankets, comforts and mattresses shall be kept out-of-doors in the direct sunlight for at least one day. Oil cloth shall not be used for protecting the mattress. Rubber sheeting used for this purpose shall be thoroughly washed on both sides and sunned after each use. The confinement room shall be thoroughly cleaned, bed and floor washed and wall wiped, and left open for at least one day so that the air and sunshine may enter freely. It shall contain no upholstered furniture and no draperies other than washable window curtains which shall be laundered after each confinement.

Section 19. Each maternity home shall keep a permanent record on forms prescribed and furnished by the State Board of Health. Such records shall be preserved intact and on no account shall any page be removed therefrom. The unavoidable loss or destruction of any record or any part thereof shall be reported immediately to the State Department of Health.

Section 20. The following reports shall be made by each maternity home to the State Board of Health within forty-eight hours:

The date and admission of any woman or infant to the home; the date and hour of birth and name of mother of any infant born therein, and name of attending physician; the date, hour, cause of death of any woman or child upon the premises, and name of attending physician; the date of release of any infant or child for adoption, and name and address of foster parents.

#### **Regulations for the Government of Homes for the Care of Infants**

##### **Regulation Number 42.**

Section 1. All rooms and wards in homes for the care of infants under two years of age shall be outside rooms and shall contain such air space as shall be deemed by the State Board of Health to be sufficient for the number of children to be cared for therein.

Section 2. The window space in each room shall not be less than one-fifth of the floor space; with proper facilities for protecting infants' eyes from strong light.

Section 3. The heating of all rooms shall be of sanitary type and sufficient to maintain the temperature at 68 degrees Fahrenheit in severe weather. In case a house is heated by a hot air system, the furnace shall be so arranged as to draw cold air from out-of-doors.

Section 4. The flooring and walls shall be in good condition and of such material as will permit thorough and easy cleaning All parts of the house shall be kept in a cleanly condition.

Section 5. The water supply shall be from a source approved by the State Board of Health. The plumbing and drainage or other arrangement for the disposal of excreta and household wastes shall be in accordance with good sanitary practice subject to the approval of the State Board of Health.

Section 6. Simple remedies and dressings for emergencies, clean bedding, body linen and towels shall be kept in sufficient quantity.

Section 7. Diapers shall be supplied in sufficient quantity to permit the use of a freshly laundered one each time the child is changed. Immediately after removing, diapers shall be placed in a covered receptacle under a disinfecting solution and shall be washed and boiled within twenty-four hours after soiling.

Section 8. When infants kept in a home for the care of infants are artificially fed, the feeding and selecting of food shall be under the direction of a legally qualified physician. No wet nurse may be provided except with the approval of the attending physician.

Section 9. When infants are artificially fed, bottles, stoppers, and nipples shall be properly sterilized after each use. Under no circumstances may the long tube nursing bottles be used.

Section 10. The licensee or owner of a maternity home shall not advertise that he or she will adopt children or hold out inducements to mothers to part with their children.

Section 11. Before any child is given for adoption, a Wasserman test on its blood shall be made at the State Health Laboratory at Vermillion, and a copy of the findings shall be given to the prospective foster parents.

Section 12. Each maternity home shall keep a permanent record on forms prescribed and furnished by the State Board of Health. Such records shall be preserved intact and on no account shall any page be removed therefrom. The unavoidable loss or destruction of any such record or any part thereof shall be reported immediately to the State Board of Health. The facts regarding each infant shall be entered in ink within twenty-four hours of their occurrence.

Section 13. The authorities in charge of a home for the care of infants shall give the inspectors for the State Board of Health

all reasonable information and shall afford them every reasonable facility for examining the records, inspecting the premises and seeing the inmates.

Section 14. The following reports shall be made to the State Board of Health by each maternity home within forty-eight hours.

The date of admission of any infant to the home;

The date, hour, cause of death of any infant upon the premises, and name of attending physician;

The date of release of any infant for adoption, name and address of foster parents.

## CHAPTER 10

### GENERAL SANITATION

- Railway Sanitary Code**
- Barber Shops**
- Cosmetic Therapy**
- Disposal of Dead Animals**
- Offensive Trades and Businesses**
- Common Drinking Cup**
- Roller Towel**
- Protection of Library Books**
- Sanitary Inspections**
- Public Bathing Places**
- Milk Pasteurization**
- Recreational Areas**
- Industrial Wastes**

#### I

### STANDARD RAILWAY SANITARY CODE

#### Transportation of Persons Having Communicable Diseases

##### Regulation Number 43

Section 1. PERSONS NOT ALLOWED TO TRAVEL.—No person knowing or suspecting himself to be afflicted with plague, cholera, small pox, typhoid fever, or yellow fever shall apply for, procure, or accept transportation in any railway train, car, or other conveyance of a common carrier, nor shall any person apply for, procure, or accept such transportation for any minor, ward, patient, or other person under his charge if known or suspected to be so afflicted.

Section 2. PERSONS NOT ACCEPTED FOR TRAVEL.—Common carriers shall not accept for transportation in any railway train, car, or other conveyance any person known by them to be afflicted with any of the diseases enumerated in Section 1.

Section 3. RESTRICTED TRAVEL.—Common carriers shall not accept for transportation on any railway train, car or other conveyance any person known by them to be afflicted with diphtheria, measles, scarlet fever, epidemic cerebrospinal meningitis, anterior poliomyelitis, mumps, whooping cough, influenza, pneumonia, epidemic encephalitis, septic sore throat, rubella, or chicken-pox, or any person known to be a carrier of these diseases, unless such person is placed in a compartment separate from other pas-

sengers, is accompanied by a properly qualified nurse or other attendant, and unless such nurse or attendant shall agree to comply and does so comply with the following regulations:

(a) Communication with the compartment within which the patient is traveling shall be restricted to the minimum consistent with proper care and safety to the patient.

(b) All dishes and utensils used by the patient shall be placed in a 5 per cent solution of carbolic acid or other fluid of equivalent disinfecting value for at least one hour after they have been used and before being allowed to leave the compartment.

(c) All sputum and nasal discharge from the patient shall be received in gauze or paper, which shall be deposited in a paper bag or in a closed vessel, and shall be destroyed by burning.

(d) Said nurse or attendant shall, after performing any service to the patient, at once cleanse the hands by washing them in a 2 percent solution of carbolic acid or other fluid of equivalent disinfecting value.

Section 4. TYPHOID AND DYSENTERY.—Common carriers shall not accept for transportation on any railway train, car, or other conveyance any person known to them to be afflicted with typhoid fever, paratyphoid fever, or dysentery, unless said person is placed in a compartment separate from other passengers, is accompanied by a properly qualified nurse or other attendant, and unless said nurse or attendant shall agree to comply and does so comply with the following regulations:

(a) Communication with the compartment in which the patient is traveling shall be limited to the minimum consistent with the proper care and safety of the patient.

(b) All dishes and utensils used by the patient shall be placed in a 5 per cent solution of carbolic acid or other fluid of equivalent disinfecting value for at least one hour after they have been used and before being allowed to leave the compartment.

(c) All urine and feces of the patient shall be received into a 5 per cent solution of carbolic acid or other fluid of equivalent disinfecting value, placed in a covered vessel, thoroughly mixed, and allowed to stand for at least two hours after the last addition thereto before being emptied.

(d) A sheet of rubber or other impervious material shall be carried and shall be spread between the sheet and the mattress of any bed that may be used by the patient while in transit.

(e) Said nurse or attendant shall use all necessary precaution to prevent the access of flies to the patient or his discharges and after performing any service to the patient shall at once cleanse

the hands by washing them in a 2 per cent solution of carbolic acid or other fluid of equivalent disinfecting value.

(f) Provided, that if a person with typhoid or dysentery is presented at a railway station in ignorance of these regulations and his transportation is necessary as a lifesaving or safeguarding measure, an emergency may be declared and the patient may be carried a reasonable distance in a baggage car, if accompanied by an attendant responsible for his care and removal: Provided, also, that regulations (a), (b), (c), (d), and (e) of this section shall be complied with insofar as the circumstances will allow, and that all bedding, clothing, rags, or cloths used by the patient shall be removed with him. And provided further, that any parts of the car which have become contaminated by any discharges of the patient shall be disinfected as soon as practicable, but not later than the end of the run, by washing with a 5 per cent solution of carbolic acid or other fluid of equivalent disinfecting value.

**Section 5. RESTRICTED APPLICATIONS FOR TRANSPORTATION.**—No person knowing or suspecting himself to be afflicted with any of the diseases mentioned in Sections 3 and 4 shall apply for, procure, or accept transportation in any railway train, car or other conveyance of a common carrier, nor shall any person apply for, procure, or accept such transportation for any minor, ward, patient, or other person under his charge if known or suspected to be so afflicted unless he shall have agreed to and made all necessary arrangements for complying, and does so comply with the regulations set forth in said Sections 3 and 4.

**Section 6. SUSPECTED CASES.**—If a conductor or other person in charge of a railway train, car, or other conveyance of a common carrier, or an agent or other person in charge of a railway station, shall have any reason to suspect that a passenger or person contemplating passage is afflicted with any of the diseases enumerated in Sections 1, 3 and 4, he shall notify the nearest health officer, or company physician if the health officer is not available, by the quickest and most practicable means possible, of his suspicion, and said health officer or physician shall immediately proceed to the train, car or other conveyance at the nearest possible point, or to the railway station, to determine whether such disease exists.

**Section 7. DISPOSITION.**—If the health officer or physician as provided for in Section 6, shall find any person to be afflicted with any of the diseases enumerated in Sections 1, 3 and 4, he shall remove such person from the station or conveyance or shall isolate him and arrange for his removal at the nearest convenient point; shall treat the car or other conveyance as infected pre-

ises, allowing it to proceed to a convenient place for proper treatment if in his judgment consistent with the public welfare, in such case notifying the health officer in whose jurisdiction the place is located; and shall take such other measures as will protect the public health; Provided, that if not prohibited in Sections 1 and 2 of these regulations the afflicted person so found may be allowed to continue his travel if arrangements are made to comply, and he does comply with the requirements of this section of these regulations pertaining to the disease with which he is afflicted.

Section 8. **LEPROSY.**—Common carriers shall not accept for transportation nor transport in any railway train, car, or other conveyance any person known to them to be afflicted with leprosy, unless such person presents permits from the Surgeon General of the United States Public Health Service or his accredited representative, and from the State Department of Health of the states from which and to which he is traveling, stating that such person may be received under said restrictions as will prevent the spread of the disease, and said restrictions shall be specified in each instance; and no person knowing or suspecting himself to be afflicted with leprosy, nor any person acting for him shall apply for, procure, or accept transportation from any common carrier unless such permits have been received and are presented and unless the person so afflicted agrees to comply with the restrictions ordered. If any agent of a common carrier shall suspect that any person in a train, car, or other conveyance or at a railway station, is afflicted with leprosy, he shall proceed as directed in the case of other suspected diseases in Sections 6 and 7 of these regulations.

Section 9. **PULMONARY TUBERCULOSIS.**—Common carriers shall not accept for transportation any person known by them to be afflicted with pulmonary tuberculosis in a communicable stage unless said person is provided with (a) sputum cup made of impervious material and so constructed as to admit of being tightly closed when not in use, (b) a sufficient supply of gauze, papers, or similar articles of the proper size to cover the mouth and nose while coughing or sneezing, (c) a heavy paper bag or other light container for receiving the soiled gauze, paper or similar articles; and unless such person shall obligate himself to use the articles provided for in the manner intended, and to destroy said articles by burning or to disinfect them by immersing for at least one hour in a 5 per cent solution of carbolic acid or other solution of equivalent disinfecting value; nor shall any person knowing himself to be so afflicted apply for, procure, or accept transportation unless he shall have agreed to and made all necessary arrangements for complying and does so comply with the regulations as set forth in this section.

Section 10. CONVEYANCE VACATED BY INFECTED PERSONS.—Immediately after vacation by a person having any of the diseases mentioned in Section 1, 3, 4 and 8, any berth, compartment or stateroom should be closed and not again occupied until properly cleaned and disinfected, and all bedding, blankets, and linen in any such space should be laundered or otherwise thoroughly cleaned and disinfected before being again used.

## II

### WATER AND ICE SUPPLIES

Section 11. WATER AND ICE SUPPLIES.—Water provided by common carriers for drinking or culinary purposes in railway trains, cars, or other conveyances or in railway stations shall be taken from supplies certified by the United States Public Health Service as meeting the required standards of purity and safety prescribed by the Interstate Quarantine Regulations of the United States.

Section 12. ICE.—Ice used for cooling water provided as in Section 11 shall be clear natural ice, ice made from distilled water, or ice made from water certified as aforesaid; and before ice is put into the water it shall be washed with water of known safety and handled in such manner as to prevent its becoming contaminated by the organisms of infectious diseases: Provided, That the aforesaid shall not apply to ice that does not come in contact with the water to be cooled.

Section 13. WATER CONTAINERS.—Water containers in newly constructed cars shall be so constructed that ice for cooling does not come in contact with the water to be cooled: Provided, That after July 1, 1924, all water containers in cars shall be so constructed that ice does not come in contact with the water.

Section 14. CARE OF WATER CONTAINERS.—All water containers where water and ice are put into the same compartment shall be thoroughly cleansed at least once each week that they are in use. All water containers and water storage tanks shall be thoroughly drained and flushed at intervals of not more than one month.

Section 15. FILLING WATER CONTAINERS.—Portable hose or tubing that is used for filling drinking water containers, or car storage tanks from which such containers are filled, shall have smooth metal nozzles, which shall be protected from dirt and contamination, and before the free end of nozzle of said hose or tubing is put into the water container or car storage tank it shall be flushed and washed by a plentiful stream of water.

**III****CLEANING AND DISINFECTION OF CARS**

Section 16. **GENERAL.**—All railway passenger cars or other public conveyances shall be kept in a reasonably clean and sanitary condition at all times when they are in service, to be insured by mechanical cleaning at terminals and layover points.

Section 17. **CLEANING.**—All day coaches, parlor cars, buffet cars, dining cars, and sleeping cars shall be brushed, swept and dusted at the end of each round trip, or at least once in each day they are in service, and shall be thoroughly cleaned at intervals of not more than seven days.

Section 18. **THOROUGH CLEANING.** — Thorough cleaning shall consist of scrubbing the exposed floors with soap and water, similarly scrubbing the toilets and toilet room floors, wiping down the woodwork with moist or oiled cloths; thorough dusting of the upholstery and carpets by beating and brushing or by means of the vacuum process or compressed air, washing or otherwise cleaning windows; and the thorough airing of the car and its contents.

Section 19. **ODORS IN CARS.**—When offensive odors appear in toilets or other parts of the car which are not obliterated and removed by cleaning as in Section 18, said toilets or other parts of the car shall be treated with a 1 per cent solution of formaldehyde or other odor destroying substance.

Section 20. **VERMIN IN CARS.**—Whenever a car is known to have become infested with bedbugs, lice, fleas, or mosquitoes, such car shall be so treated as to effectively destroy such insects, and it shall not be used in service until such treatment has been given.

**IV****CARS IN SERVICE**

Section 21. **CLEANING.**—The cleaning of cars while occupied shall be limited to the minimum consistent with the maintenance of cleanly conditions, and shall be carried out so as to cause the least possible raising of dust or other annoyance to passengers.

Section 22. **SWEEPING.**—Dry sweeping of the interior of a car in transit with an ordinary broom is prohibited.

Section 23. **DUSTING.**—Dry dusting of the interior of a car in transit is prohibited.

Section 24. **BRUSHING.**—The brushing of passengers' clothing in the body of the car in transit is prohibited.

Section 25. DRINKING CUPS.—Individual drinking cups in sufficient number shall be supplied in all cars, and the use of common drinking cups is prohibited.

Section 26. TOWELS.—The supplying of roller towels or other towels for common use in cars is prohibited.

Section 27. COMB AND BRUSH.—The supplying of combs and brushes for common use in cars is prohibited.

Section 28. SPITTING.—Spitting on the floors, carpets, walls, or other parts of cars by passengers or other occupants of them is prohibited.

Section 29. CUSPIDORS.—An adequate supply of cuspidors shall be provided in all sleeping cars, smoking cars, and smoking compartments of cars while in service. Said cuspidors shall be cleaned at the end of each trip, and oftener if their condition requires.

Section 30. BRUSHING OF TEETH.—Spitting or blowing the nose or brushing the teeth over wash basins in cars is prohibited. Separate basins for brushing the teeth shall be provided in the wash rooms of sleeping cars.

Section 31. DRINKING WATER AND ICE.—Drinking water and ice on railway cars shall be supplied in accordance with the conditions set forth in sections 11, 12, 13, 14 and 15 of these regulations.

Section 32. VENTILATION AND HEATING.—All cars when in service shall be provided with an adequate supply of fresh air, and in cold weather shall be heated so as to maintain comfort. When artificial heat is necessary, the temperature should not exceed 70 degrees F., and in sleeping cars at night after passengers have retired it should not exceed 60 degrees F.

Section 33.—TOILETS IN CARS.—Proper toilet room and lavatory shall be provided in all railway passenger cars and mail cars, for the use of their occupants. Such toilet shall be supplied with toilet paper, soap, and free or pay clean towels, and shall be kept in a clean and sanitary condition. Cars used exclusively in suburban service are not required to be so equipped.

Section 34. TOILETS TO BE LOCKED.—The toilet rooms in all railway cars shall be locked or otherwise protected from use while trains are standing at stations, passing through cities, or passing watersheds draining into reservoirs furnishing domestic water supplies unless adequate watertight containers are securely placed under the discharge pipe. The state health authority having jurisdiction shall designate the area of watersheds that may be affected by pollution from railroads, and shall notify the managing

officers of railroads as to the points between which all toilets shall be locked.

Section 35. LAVATORIES IN DINING CARS.—A lavatory shall be provided in all dining cars for use of dining car employees, and the same shall be supplied with soap and clean towels, and shall be kept in a clean and sanitary condition. Such lavatory shall have no direct connection with the kitchen, pantry, or other place where food is prepared. The words "dining car" as used in these regulations shall be held to include all cars in which food is prepared and served.

Section 36. DINING CAR TO BE SCREENED.—Dining cars shall be screened against the entrance of flies or other insects, and it shall be the duty of dining-car employees to destroy flies or other insects that may gain entrance.

Section 37. DINING CAR EMPLOYEES TO CLEANSE HANDS.—Dining car employees shall thoroughly cleanse their hands by washing with soap and water after using a toilet or urinal and immediately before beginning service.

Section 38. CARE OF TABLEWARE.—All cooking, table and kitchen utensils, drinking glasses, and crockery used in the preparation or serving of food or drink in dining cars shall be thoroughly washed in boiling water and suitable cleansing material after each time they are used.

Section 39. FOOD CONTAINERS.—Refrigerators, food boxes, or other receptacles for the storing of fresh food in dining and buffet cars shall be emptied and thoroughly washed with soap and hot water at least once in each seven days that they are in use.

Section 40. FOOD AND MILK.—No spoiled or tainted food, whether cooked or uncooked, shall be served in any dining car, and no milk or milk products shall be served unless the milk has been pasteurized or boiled.

Section 41. GARBAGE.—Garbage cans in sufficient number and with suitable tight-fitting covers shall be provided in dining cars to care for all refuse food and other wastes, and such wastes shall not be thrown from the car along the right of way, within the limits of cities, towns, or villages, or within drainage areas furnishing domestic water supplies.

Section 42. DINING CAR INSPECTION.—The person in charge of the dining car shall be responsible for compliance with all dining car regulations, and he shall make an inspection of the car each day for the purpose of maintaining a rigorous cleanliness in all portions thereof.

Section 43. EXAMINATION OF FOOD HANDLERS.—No person shall serve as cook, waiter, or in any other capacity in the

preparation or serving of food in a dining car who is known or suspected to have any dangerous communicable disease. All persons employed for such service shall undergo a physical examination by a competent physician before being assigned to service, and before returning to work after any disabling illness, and at such other times during their service as may be necessary to determine their freedom from such diseases, and shall be immediately relieved from service if found to be so afflicted.

## V

**RAILWAY STATIONS**

Section 44. GENERAL.—All railway stations, including their waiting rooms, lunch rooms, restaurants, wash rooms, and toilets, shall be kept in a clean and sanitary condition at all times, to be insured by mechanical cleaning at regular intervals.

Section 45. CLEANING.—All waiting rooms and other rooms used by the public shall be swept and dusted daily; and at intervals of not more than seven days the floor shall be scrubbed with soap and water, and the seats, benches, counters, and other wood-work shall be similarly scrubbed, or shall be rubbed down with a cloth moistened with oil.

Section 46. SWEEPING.—If sweeping is done while rooms are occupied or open to occupancy by patrons, the floor shall be first sprinkled with wet sawdust or other dust-absorbing material.

Section 47. DUSTING.—If dusting is done while rooms are occupied or open to occupancy by patrons; it shall be done only with cloths moistened with water, oil or other dust absorbing material.

Section 48. SPITTING.—Spitting on the floors, walls, seats, or platforms of railway stations is prohibited.

Section 49. CUSPIDORS.—In all waiting rooms where smoking is permitted an adequate supply of cuspidors shall be provided; such cuspidors shall be cleaned daily, and oftener if their condition requires.

Section 50. COMMON CUPS.—Individual drinking cups, in sufficient number shall be supplied in all stations, and the use of common drinking cups is prohibited.

Section 51. COMMON TOWELS.—The supplying of roller towels or other towels for common use in railway stations is prohibited.

Section 52. COMBS AND BRUSHES.—The supplying of combs and brushes for common use in railway stations is prohibited.

Section 53. TOILET FACILITIES. — All railway stations

where tickets are sold shall provide adequate toilet facilities, of a design approved by the State Board of Health, for the use of patrons and employees; and there shall be separate toilets for each of the two sexes.

Section 54. STATION TOILETS.—If a railway station is located within 300 feet of a public sewer, water-flushing toilets shall be installed and permanently connected with such sewer, and a wash basin or basins shall be located near the toilet and similarly connected; and such toilets and lavatories shall be kept in repair and good working order at all times.

Section 55. CARE OF TOILETS.—All toilets installed as set forth in Section 54 shall be cleaned by scrubbing the floors, bowls and seats with soap and water.

Section 56. ODORS IN TOILETS.—When offensive odors appear in toilets which are not obliterated and removed by cleaning as in Section 55, said toilets shall be treated with a 2 per cent solution of formaldehyde or other odor-destroying substance.

Section 57. TOILET SUPPLIES.—Toilet and washrooms installed as set forth in Section 54 shall be constantly furnished with an adequate supply of toilet paper, soap, and free or pay clean towels.

Section 58. PRIVIES.—If no sewer connection is available as set forth in Section 54, a sanitary privy of a design approved by the State Board of Health shall be maintained within a reasonable distance from the station. Such privy shall be adequately protected against the entrance of flies, shall be kept supplied with toilet paper, the seats shall be kept clean, and the vaults shall be treated with sodium hydrate or other approved disinfectant at least once in each week and shall be cleaned out and emptied at such intervals as will avoid the development of a nuisance.

Section 59. DRINKING WATER AND ICE.—Drinking water and ice in railway stations shall be supplied in accordance with Sections 11, 12, 13, 14 and 15 of these regulations.

Section 60. WATER NOT USABLE FOR DRINKING.—If water which does not conform to the standards set forth in Section 11 of these regulations is available at any tap or hydrant in a railway station, a notice shall be maintained on each tap or hydrant which shall state in prominent letters, "Not fit for drinking."

Section 61. DRINKING FOUNTAINS.—If drinking fountains of the bubbling type are provided in any railway station, they shall be so made that the drinking is from a free jet projected at an angle to the vertical and not from a jet that is projected vertically or that flows through a filled cup or bowl.

Section 62. REFUSE CANS.—At all railway stations where

there is an agent there shall be provided and maintained an adequate supply of open or automatically closing receptacles for the disposition or refuse and rubbish, and such receptacles shall be emptied daily and kept reasonably clean and free from odor.

Section 63. CISTERNS, CESSPOOLS, ETC.—All cisterns, water storage tanks, and cesspools in or about railway stations shall be adequately screened against the entrance of mosquitoes, and all collections of surface water on station property shall be drained or oiled during the season of mosquito flight, to prevent the breeding of mosquitoes.

Section 64. RESTAURANTS TO BE SCREENED.—All restaurants and lunch rooms or other places where food is prepared or served in a railway station, shall have doors and windows adequately screened against the entrance of flies or other insects; and all food on display on storage racks shall be adequately covered.

Section 65. LAVATORIES FOR RESTAURANTS.—A lavatory of easy and convenient access shall be provided for the use of employees in every restaurant or lunch room in any railway station, and it shall be provided with an adequate supply of water, soap and clean towels.

Section 66. RESTAURANT EMPLOYEES. — Restaurant employees who are engaged in the preparing or serving of food shall thoroughly cleanse their hands by washing with soap and water after using a toilet or urinal and immediately before beginning service.

Section 67. KITCHEN AND TABLE UTENSILS.—All cooking table and kitchen utensils, drinking glasses and crockery used in the preparation or serving of food or drink in railway restaurants or lunch rooms shall be thoroughly washed in boiling water and suitable cleansing material after each time they are used.

Section 68. FOOD CONTAINERS.—Refrigerators, food boxes, or other receptacles for the storing of fresh food in railway restaurants or lunch rooms shall be emptied and thoroughly washed with soap and hot water at least once in each seven days that they are in use.

Section 69. GARBAGE.—Garbage cans in sufficient number and with suitable tight-fitting covers shall be provided in all restaurants and lunch rooms to care for all refuse food and other wastes, and such cans shall be emptied in an approved place, and kept in a clean and sanitary condition.

Section 70. RESTAURANT INSPECTION. — The manager, chef, or other person in charge of any railway restaurant or lunch room shall be responsible for compliance with all regulations pertaining thereto, and he shall make an inspection of the premises

daily for the purpose of maintaining a rigorous cleanliness in all parts thereof.

Section 71. STATION INSPECTED.—The agent, manager, or other person in charge of any railway station shall be responsible for compliance with all regulations pertaining thereto, and he shall make or have made by a responsible person reporting to him, frequent inspections of premises for the purpose of maintaining a rigorous compliance with all such regulations.

Section 72. EXAMINATION OF FOOD HANDLERS. — No person shall serve as a cook, waiter, or in any other capacity in the preparation or serving of food in a railway restaurant or lunch room who is known or suspected to have any dangerous communicable disease. All persons employed for such service shall undergo a physical examination by a competent physician before being assigned to service, and before returning to work after any disabling illness, and at such other times during their service as may be necessary to determine their freedom from such diseases, and shall be immediately relieved from service if found to be so infected.

## VI

### CONSTRUCTION CAMPS

Section 73. DEFINITION.—For the purpose of these regulations construction camps shall be considered to include all camps and similar places of temporary abode, including those on wheels established by or for the care of working forces engaged in the construction and repair of properties or parts thereof: Provided, camps which are established to meet emergency conditions and are not occupied longer than five days, shall not be included, except that Section 90 of these regulations shall apply to them.

Section 74. GENERAL.—All camps shall be so located and so maintained as to be conducive to the health of their occupants and not to endanger the health of the public; and all tents, houses, stables, or other structures therein shall be kept in a reasonably clean and sanitary condition at all times.

Section 75. LOCATION.—Camps, except those on wheels, should be located on high, well-drained ground; any natural sink holes, pools or other surface collections of water in the immediate vicinity should be drained and filled when the camp is first established; and all such water not subject to complete drainage should have the surface oiled at intervals of not more than seven days during the season of mosquito flight.

Section 76. ARRANGEMENT.—The general scheme of relations of the structure of a camp should be as follows: The kitchen

should be located at one end of the camp; next to this should be the eating quarters, then the sleeping quarters, then the toilets for the men, then the stable, thus bringing the kitchen and the stable at opposite ends of the camps, which should be as far apart as is consistent with natural topography and the necessity for convenient access.

Section 77. WATER SUPPLIES.—All water supplies for camps should be properly chlorinated, unless obtained from a source which has been approved by the State Board of Health.

Section 78. WATER CONTAINERS.—All drinking water containers in camps shall be securely closed and so arranged that water can be drawn, only from a tap, and said containers shall be kept clean and free from contamination.

Section 79. GARBAGE AND REFUSE.—All garbage, kitchen wastes, and other rubbish in camps shall be deposited in suitably covered receptacles the contents of which shall be emptied and burned each day, and the manure from the stable shall be likewise collected and burned each day, or disposed of in some other manner approved by the State Board of Health.

Section 80. SCAVENGER.—In all camps where there are 100 men or more there shall be one employee whose duty shall be to act as scavenger and garbage collector.

Section 81. TOILETS.—Every camp shall have an adequate number of latrines and urinals, so constructed and maintained as to prevent fly breeding and the pollution of water, and the use of latrines and urinals by the inhabitants of the camps shall be made obligatory. Latrines and urinals may consist of deep trenches covered with houses adequately screened against flies, or, of any other type approved by the State Board of Health. They shall not be located within less than 200 feet of any spring, stream, lake or reservoir forming part of a private water supply.

Section 82. WASHING FACILITIES.—There shall be provided in all camps adequate washing facilities for the use of the occupants thereof.

Section 83. SCREENING.—The kitchen, eating houses, and bunk houses of all camps shall be effectively screened against the entrance of flies and mosquitoes during the season of the flight of these insects.

Section 84. CARE OF TABLEWARE.—All cooking, table, and kitchen utensils, drinking glasses, and crockery used in the preparation or serving of food or drink in camps shall be thoroughly washed in boiling water and suitable cleansing material after each time they are used.

Section 85. FOOD CONTAINERS.—Refrigerators, food boxes,

or other receptacles for the storing of fresh food in camps shall be emptied, thoroughly washed with soap and hot water at least once in seven days that they are in use.

Section 86. FOOD AND MILK.—No soiled or tainted food, whether cooked or uncooked, shall be served in any camp, and no milk or milk products shall be served unless the milk has been pasteurized or boiled.

Section 87. EXAMINATION OF FOOD HANDLERS.—No person shall serve as a cook, waiter, or in any other capacity in the preparation or serving of food in any camp who is known or suspected to have any dangerous communicable disease. All persons employed for such service shall undergo a physical examination by a competent physician before being assigned to service, and before returning to work after any disabling illness, and at such other times during their services as may be necessary to determine their freedom from such diseases, and shall be immediately relieved from service if found to be so afflicted.

Section 88. SICK PERSONS.—When any occupant of a camp becomes sick with a dangerous communicable disease he shall be immediately isolated, and the health officer within whose jurisdiction the camp is located shall be immediately notified.

Section 89. VERMIN.—It shall be the duty of some one appointed as caretaker of the camp to make regular weekly inspections of the occupants and premises in order to ascertain the presence of lice or other vermin. Persons found to be infested shall be required to bathe, and their clothing boiled; and the premises found to be infested shall be fumigated with sulphur or treated with some other effective vermin-destroying method.

Section 90. ABANDONED CAMPS.—When any camp is to be abandoned, all garbage, rubbish, and manure shall be collected and burned, the latrine trench filled, and the grounds and buildings shall be left in a clean and sanitary condition.

Section 91. DUTY TO ENFORCE REGULATIONS.—It shall be the duty of the superintendent, foreman, or other person in charge of a camp to see that all regulations pertaining thereto are faithfully complied with.

### **BARBERS**

#### **Regulation Number 44.**

The South Dakota Board of Barber Examiners has heretofore duly adopted the following rules regulating barber shops and barber schools, and the same have been approved by the State Board of Health pursuant to Section 22, Chapter 209, Session Laws of 1931, to-wit:

1. The floors, walls, furniture and other fixtures of barber

shops shall at all times be kept clean. All jardineres and cuspidors shall be thoroughly cleaned at least once a day. Floors must be kept free from hair and mopped each day.

2. Proper Quarters. Every barber shop shall be well lighted, well ventilated and kept in a clean, orderly and sanitary condition.

3. Public drinking cups are prohibited by the regulation of the State Board of Health.

4. Tweezers, needles, and all other instruments used for the removal of hair, blackheads, or the opening of pimples must be thoroughly sterilized in each case before being used on any individual. All tools used upon a customer must be cleaned and sterilized before use on each customer in accordance with the instructions of the State Board of Barber Examinees, approved by the State Board of Health.

5. No barber shall permit any person to use the head rest of any barber's chair under his control unless the head rest is covered by a towel that has been washed since last being used, or by a clean newspaper.

6. No barber shall knowingly serve a person afflicted in a dangerous or infectious stage of a disease with erysipelas, eczema, imptigo, psychosis, tuberculosis, or any other contagious or infectious disease. Any person so afflicted is prohibited from being served in any barber shop, barber school or college.

7. No barber or other person in charge of any barber shop shall undertake to treat any disease of the skin.

8. Unless requested to do so by the person served, no barber shall administer any drops of medicine to the eyes nor shall he administer in any other manner any medicines or treatment which administration is not distinctly a part of the profession of barbering.

9. Every barber shall thoroughly wash his hands immediately before serving each customer.

10. Alum, or any other materials, used to stop the flow of blood shall be used only in liquid or powder form.

11. The use of styptic pencils, lump alum, powder puffs and hair brushes is prohibited. If lump alum, powder puffs, styptic pencils, or hair brushes are found on the barber's work case, it is prima facie evidence that the same is being used therein in the practice of barbering.

Each of the following constitutes a misdemeanor, punishable upon conviction by a fine of not less than twenty-five dollars (\$25.00) or not more than one hundred dollars (\$100.00).

12. Permitting any person in one's employ, supervision or con-

trol to practice as an apprentice unless that person has a certificate of registration as registered apprentice.

13. Permitting any person in one's employ to practice as an apprentice or a journeyman barber who has not been issued the proper card by the Board of Barber Examiners.

14. The use of any room or place for barbering which is also used for residential or business purposes, except the sale of hair tonics, lotions, creams, cutlery, toilet articles, cigars, tobacco, unless a substantial partition of ceiling height separates the portion used for residential or business purposes.

15. The failure or refusal by any barber or other person in charge of any barber shop to use separate and clean towels for each person served, or to discard and launder each towel after once being used.

16. The failure or refusal of any barber or other person in charge of any barber shop to supply clean hot and cold water in such quantities as may be necessary to conduct such shop in a sanitary manner or the failure or refusal of any such person to have water and sewer connections from such shop with municipal water and sewer system, where the latter is available for use, or the failure or refusal of such persons to maintain a receptacle for hot water of a capacity of less than five gallons.

17. The wilful failure to display a certificate of registration as required by statute.

18. Obtaining or attempting to obtain a certificate of registration for money other than the required fee, or any other thing of value, or by fraudulent misrepresentations.

19. Every barber and every apprentice who continues in active practice or service shall annually on or before July 1 of each year renew his certificate of registration and pay the required fee. Every certificate of registration which has not been renewed during the month of July in that year shall expire on the first of August of that year.

#### **CHEMICALS USED FOR STERILIZING**

The following is a list of chemical disinfectants and their strength of solution as adopted by the National Association of Barber Examiners as a result of their convention in 1930:

1. Formalin (25% solution) (Formaldehyde).

To prepare: Formalin, 2 parts; water, 5 parts; glycerine, 1 part.

2. Liquor Cresolis Compound (4% solution)

(Cresol-lysol or Creolin)

L. C. Comp., 1 part; water 24 parts.

3. Phenol (5% solution) (Carbolic acid)

Phenol, 1 part; water, 19 parts.

Other disinfecting solutions:

4. Alcohol, 70%

5. Mercury cyanide, 1-2000 prepared by dissolving one tablet in one quart of water. (Very poisonous)

6. Mercury bichloride, 1-1000 solution prepared by dissolving one tablet in a pint of water. (Poisonous and also corrosive to metal)

Antiseptics to be used on the skin:

1. Iodine. Very good but leaves a brown stain.

2. Mercurochrome (2%). This leaves a red stain.

3. Alcohol. 50% must not be used where irritation is contraindicated.

4. Boric acid. Full strength, mild antiseptic.

5. Hydrogen peroxide. Cleansing agent for wounds.

There are some good sterilizing fluids that are odorless on the market now, which the barber can use for sterilizing purposes.

### INSTRUCTIONS

Tweezers, needles and other instruments of this nature must be sterilized by immersion in scalding hot or boiling water, or in a 5 to 10% solution of commercial formaldehyde and water for at least thirty minutes.

Combs and brushes must be cleaned each day or oftener if necessary by washing with hot water and soap or soda. Razors, shears, and clippers must be cleansed after each separate use thereof by washing in hot water and soap.

A violation of any of these regulations constitutes a misdemeanor punishable by a fine of not exceeding \$200 or by imprisonment for not more than 90 days or both.

### COSMETIC THERAPY

#### Regulation Number 45.

Section 1. All persons practicing beauty culture as defined must provide a suitable place, equipped to give adequate service to patrons and subject to inspection by the constituted authorities.

Section 2. If a beauty shop is located in a private home or in connection with some business, the room used for the shop must not be used as a living, dining or sleeping room. If only a portion of the room is used for the shop, it shall be separated from

the other part of the room by a fixed partition that is at least five feet high and fastened to the walls and floor of said room. If a beauty shop is connected to another room by an arch or double door, the arch or doorway must be closed either by wooden doors or a stationary partition.

Section 3. The location of a beauty shop in a building occupied or frequented by persons of an immoral character is prohibited. The use of a shop for immoral purposes shall be sufficient cause for forfeiture of a license.

Section 4. Floors, walls, furniture and other fixtures must be kept clean at all times. All bowls, basins, jars, etc., must be antiseptically cleansed immediately after using.

Section 5. Every owner of any beauty shop must supply hot and cold water in such quantities as may be necessary to conduct said beauty shop in a sanitary manner.

Section 6. No owner or manager of a beauty shop shall permit any person suffering from a communicable disease, or from any venereal disease in a communicable form, to work in said beauty shop.

Section 7. Every person employed in a beauty shop shall use separate and clean towels for each patron and shall, while serving said patron, wear washable aprons, uniforms or coats, which shall be kept clean.

Section 8. After a towel has been used once it must be discarded until properly sterilized and laundered. Dipping used towels in receptacles containing hot water and using same on a person is insanitary and strictly forbidden. All used towels must be boiled at least ten minutes.

Section 9. No person employed in a beauty shop shall use the head rest of any operating chair under his or her control unless the head rest is covered, and said cover has been washed since last being used; or covered by a clean piece of paper toweling which must be renewed after each patron.

Section 10. Combs, brushes, and other articles must be thoroughly cleansed and adequately sterilized in a solution of three ounces of formaldehyde to one gallon of water as approved by the State Board of Health. Each operator must have at least twelve combs and six brushes.

Section 11. Glass or metal articles which cannot be boiled must be cleansed in soap and water, rinsed in alcohol and kept in a formaldehyde sterilizer, or immersed in an approved germicidal solution for not less than twenty minutes. Each shop must have at least one cabinet sterilizer and one wet sterilizer.

Section 12. No employee of any beauty shop shall massage any person when the surface to be massaged is inflamed or broken

cut, or contains pus, unless said person is provided with clean sterilized instruments and cups by the owner of the shop, and the same are properly sterilized and cared for afterwards.

Section 13. Every person engaged in a beauty shop must thoroughly cleanse his or her hands immediately before and after serving each patron.

Section 14. All creams, lotions, and other cosmetics used for patrons must be kept in clean and closed containers.

Section 15. Open powder boxes must not be used in a reception room for patrons; the powder must be in shakers or similar receptacles.

Section 16. Creams and other semi-solid substances must be dipped from the container with a sterile article or spatula. Removing such substances with the fingers is prohibited.

Section 17. All persons engaged in a beauty or hairdressing shop must display in a conspicuous place their certificate of registration, with a certificate showing freedom from communicable diseases. The health certificate must be renewed yearly during the month of January.

Section 17A. The physician's certificate is to be based upon the physical examination and laboratory findings as provided for in the following blank. The results of examination, when completed, shall be forwarded to the Secretary of the State Board of Cosmetic Therapy.

**Proposed Blank Form:**

Name ..... Address .....  
Where employed .....  
Age ..... Sex ..... Color ..... Nativity .....  
Single ..... Married ..... Divorced .....  
Does the applicant show evidence of disease? Viz: .....  
Tuberculosis Pulmonary ..... Other Tuberculosis .....  
Skin Diseases .....  
Syphilis ..... Wasserman or Kahn .....  
Gonorrhea Acute ..... Gonorrhea Chronic .....  
Vaccinated for Smallpox .....  
Immunized for Diphtheria .....

I, a practicing physician, under the laws of the State of South Dakota, have examined ..... of ..... South Dakota, as provided for under Section 17A of Regulation No. 45. I find said ..... free from communicable disease.

Dated ..... 19.....

M. D.

Address .....

Approved by Attorney General, Leo Temmey on August 27, 1942.

Section 18. Waveset must be applied from a container which does not permit the dipping of the comb or brush into such container.

### **DISPOSAL OF DEAD ANIMALS**

#### **Regulation Number 47.**

Section 1. No carcass of any dead animal shall be left unburied in the State of South Dakota, nor shall it be thrown into any lake, stream, pond, well or any other body of water.

Section 2. Any such carcass shall be buried by the owner so that it will be covered with at least three feet of earth.

Section 3. Burial shall be made within twenty-four hours after death, and in all cases of death from communicable disease the body shall be thoroughly enveloped in quicklime.

Section 4. At all municipal dumping grounds where carcasses are disposed of provision must be made for their immediate burial.

Section 5. In lieu of the foregoing the dead bodies of animals may be burned.

### **OFFENSIVE TRADES OR BUSINESS**

#### **Regulation Number 48.**

No tannery, slaughter house, butcher shop, creamery, feeding yards for stock, livery or boarding stable, rendering establishment, or other offensive trade or business, shall be located in any city, village, or township in South Dakota without first having secured a permit for such location from a local board of health. Such permit shall designate the place where such trade or business may be carried on.

### **COMMON DRINKING CUP**

#### **Regulation Number 49.**

No person, company, or corporation having charge or control of any hotel, restaurant, theater, hall, store, school house, church, station, railroad train, steam or electric car or other institution or conveyance frequented by the public or which may be used for the purpose of a public assembly or as a place of employment may be permitted to furnish any cup, vessel, or other receptacle to be used promiscuously as a common drinking cup, or permit any cup, vessel or other receptacle to be used by more than one person for the common indiscriminate or promiscuous use or purpose of drinking therefrom.

## ROLLER TOWEL

### **Regulation Number 50.**

The use of roller towels or any large towel which may be used for more than one service, shall not be permitted in any hotel, school house, restaurant, boarding house, saloon, club house, public lavatory, wash rooms, nor in any public or private place where a number of people congregate, in the State of South Dakota; but instead the owners, proprietors, managers, or other persons in charge of such places shall provide a sufficient quantity of individual towels of any fabric approved by the State Board of Health so that each person may have a clean one for his own use.

## PROTECTION OF LIBRARY BOOKS

### **Regulation Number 51.**

Section 1. Library books that have been in any house occupied by a patient suffering from diphtheria, scarlet fever, smallpox, tuberculosis, or typhoid fever must be reported to the local health officer and by him to the librarian with a warning that such books may be a means of infection. Such books must not again be placed upon the shelves of the library until they have been thoroughly disinfected under the supervision of the local health officer. Unless the books are of special value, they shall be destroyed by the library authorities rather than returned to the shelves for future use.

Section 2. Books must not be loaned to those residing in rooms or apartments occupied by patients suffering from diphtheria, scarlet fever, smallpox, tuberculosis or typhoid fever, unless the same are to be destroyed after use in such room or apartments.

## SANITARY INSPECTION

### **Regulation Number 52.**

Section 1. The health officer in each city and village in the State of South Dakota shall make a thorough sanitary inspection of his municipality in the month of May, and present the written report of such sanitary inspection, together with his recommendations, to the council on or before the first day of June, of the year in which the inspection is made. The health officer shall send a copy of this report to the State Board of Health before July 1st of the same year. Other sanitary inspections shall be made during each year if deemed necessary.

Section 2. Preceding the regular May sanitary inspection the health officer in each city and village shall publish in a local paper or by means of bills posted in two or more conspicuous places,

an order for the citizens to thoroughly clean all yards, vaults, cess-pools and all sheds or barns containing manure on or before a given date. If upon inspection this general order is found not to be carried out, the like individual notices shall be served.

### PUBLIC BATHING PLACES

#### **Regulation Number 53.**

#### **CONSTRUCTION**

Section 1. No person, corporation, private or public institution or municipality shall hereafter construct or cause to be constructed any artificial swimming pool and appurtenances which is for public use, without first receiving the approval of plans and specifications by the State Board of Health for such construction.

Section 2. No major alterations or changes in existing swimming pools shall be made without the approval of plans by the State Board of Health.

Section 3. The pool shall be constructed in accordance with the approved plans and specifications and no changes from the approved plans shall be made without the approval of the State Board of Health.

Section 4. Two complete sets of plans and specifications, together with a complete report setting forth the basis of design and other data necessary, shall be submitted for approval. Approval by the State Board of Health shall be required of only such features as are of sanitary significance or as affect the safety of the users of the pool.

#### **OPERATION**

Section 5. The operation of all public bathing places shall be under the supervision of the State Board of Health and such operation records shall be kept as set forth in the requirements of the State Board of Health.

Section 6. The State Board of Health shall issue a set of minimum requirements relative to the design, construction and operation of public bathing places.

### MILK

#### **Regulation Number 54.**

Milk—Milk is hereby defined to be the lacteal secretion obtained by the complete milking of one or more healthy cows, excluding that obtained within 15 days before and 5 days after calving, or such longer period as may be necessary to render the milk

practically colostrum free; which contains not less than 8 percent of milk solids not fat, and not less than 3  $\frac{1}{4}$  percent of milk fat.

Milk Products—Milk products shall be taken to mean and include cream, sour cream, homogenized milk, goat milk, Vitamin D milk, buttermilk, skimmed milk, reconstituted or recombined milk and cream, milk beverages, and skimmed milk beverages.

Pasteurization—The terms "pasteurization," "pasteurized," and similar terms shall be taken to refer to the process of heating every particle of milk or milk products to at least 143° F., and holding at such temperature for at least 30 minutes, or at least 160° F., and holding at such temperature for at least 15 seconds, in approved and properly operated equipment; provided that nothing contained in this definition shall be construed as disbarring any other process which has been demonstrated to be equally efficient and is approved by the State Board of Health.

Section 1. No pasteurization plant or equipment used to pasteurize milk or milk products sold for human consumption shall be installed, or materially altered, or extended until complete plans and specifications for such installation, alteration, or extension, together with such other information as the State Board of Health may require, have been submitted in duplicate and approved by the State Board of Health in so far as the sanitary features are concerned.

All construction shall be in accordance with the plans and specifications as finally approved, and no installation, alteration, or extension shall be placed in use until after final inspection and approval by the State Board of Health.

Section 2. No milk or milk products which are labeled Grade A shall be in the possession of, or offered or exposed for sale by a distributor, unless such milk or milk products have been produced, processed, and distributed according to the requirements for Grade A milk as defined by the State Board of Health and unless an ordinance and code, approved by the State Board of Health, are in effect in the community in which the milk products are produced, processed and distributed.

#### RECREATIONAL AREAS

##### **Regulation Number 55.**

Note—The following regulations apply to those water sheds of lakes and streams, or parts thereof, which are used for recreational purposes; and to all public picnic and recreation areas.

Section 1. Sewerage. (a) No municipal sewer system shall discharge into such a lake or stream without first being treated by a sewage treatment process or processes approved by the State Board of Health.

(b) All privies, cesspools, individual septic tanks, filtration systems, and other means of sewage disposal within such areas shall be constructed in accordance with plans and specifications approved by the State Board of Health.

(c) In no case shall the horizontal distance from an earth pit privy to the waters edge of a stream or lake or a source of water supply be less than 50 feet. A greater distance is preferable.

(d) The effluent from septic tanks or cesspools shall not discharge into a stream or lake but shall discharge into a sub-surface or other filter system of approved type. No part of the night soil or sludge from any privy, cesspool, or septic tank shall be discharged onto the surface of the ground. Final disposal of such contents shall be by burial under at least one foot of earth at a point where this contaminating material will not endanger a water supply. Where transportation of night soil or sludge is necessary, the same shall be accomplished by placing this material in a covered container.

(e) The contents of chemical closets shall be disposed of by discharging the same into an approved sewage system or by burial.

Section 2. Water Supply. (a) The water supplies of resorts, camps, public picnic and recreation areas, and other establishments serving the public shall be constructed and operated in accordance with plans and specifications approved by the State Board of Health.

Section 3. Garbage. (a) All garbage in these areas shall be disposed of by incineration or burial. Until final disposal is made of such material, the same shall be kept in covered containers approved by the State Board of Health.

Section 4. Dumping Grounds and Refuse. (a) Dumping grounds shall not be established where the surface water washing over and through the same can enter such streams or lakes.

(b) Refuse shall not be placed in such streams or lakes or on the banks thereof where the same may be washed into said bodies of water.

(c) The horizontal distance from a pile of manure or other barnyard refuse to the waters edge of such a stream or lake shall in no case be less than 50 feet. In all cases care shall be exercised to keep such material from washing into the water courses.

#### INDUSTRIAL WASTES

##### Regulation Number 56.

Section 1. All wastes discharged from industrial plants shall be treated in such a manner as to remove possibility of spreading contagious diseases, or causing nuisances.

Section 2. Plans and specifications for the installation, alteration, or extension of treatment plants for such wastes, together with such information as the State Board of Health may require, shall be submitted in duplicate and approved by the State Board of Health from a sanitary standpoint.

All works shall be constructed in accordance with the plans finally approved.

### HATTERS' FUR

#### **Regulation Number 57.**

**DEFINITIONS:** For the purpose of carrying out the provisions of these regulations the following terms are defined:

**HATTERS' FUR** is any animal fiber or other substance used in the manufacture of hats, which is treated or otherwise prepared by the process of, or in a manner similar to that of carroting.

**CARROTING** is the process of treating hatters' fur with mercury nitrate or any other solution or material for the purpose of rendering the hatters' fur suitable in the manufacture of hats.

**MERCURIAL CARROT** is any solution or material containing mercury or its compounds in combination with nitric acid or other materials and used in the carroting or preparation of hatters' fur.

Effective December 1, 1941 the use of mercurial carrot in the preparation of hatters' fur or the use of mercurial carroted hatters' fur in manufacturing is hereby prohibited. Fur cutters having mercurial carroted hatters' fur on hand December 1, 1941 may use said fur until it is consumed.

### **TOURIST CAMPS, TRAILER CAMPS, CABIN CAMPS AND SIMILAR ESTABLISHMENTS**

#### **Regulation Number 58.**

Section 1. All tourist camps, trailer camps, cabin camps and similar establishments shall comply with the following requirements:

(a) **WATER SUPPLY.** A water supply which meets with the approval of the health officer shall be provided. This water shall be dispensed in a sanitary manner.

(b) **EXCRETA AND SEWAGE.** There shall be one toilet for each sex for every 10 trailers or cabins or fraction thereof. Toilets shall be well lighted at all times day and night, well ventilated with screened openings, and properly maintained. No toilet shall be located closer than 50 feet to any trailer and no trailer shall be placed over 150 feet from a toilet. The owner or management of all camps shall provide a satisfactory depository for the contents of trailer house soil cans or chemical toilets, and also shall provide

washing facilities for the chemical toilets or cans, in a sanitary manner.

(c) REFUSE. There shall be a fly-tight metal garbage can at each trailer or cabin. It shall be the duty of the camp owner or his agent to provide for the collection, removal and disposal in an approved manner of garbage and other waste materials.

(d) SAFETY. Camping areas shall be kept free of litter, rubbish, and inflammable material at all times. Portable fire extinguishers shall be available and in good repair. If electrical outlets are provided they shall be installed in compliance with the National Electrical Code.

(e) COMMUNICABLE DISEASE. It shall be the duty of all camp managers to report immediately to the local health officer all known or suspected cases of communicable disease.

(f) FOOD HANDLING. Any food or beverage sold on the premises shall be handled in a sanitary manner which meets with the approval of the health officer.

(g) BATHING. Any bathing facilities which are provided must meet with the approval of the health officer.

(h) DUTIES OF CAMP OWNER. It shall be the duty of the camp owner, his agent, or camp manager to keep a register of all persons accommodated on the camp or park, said register to include the names of all persons, their home addresses, the license number and description of their automobile, trailer, and/or other vehicles; and to have such records available for inspection by the health officer or law enforcing officers. It shall also be the duty of the owner, his agent or manager to maintain the camp in such a way that it will not become a public nuisance.

(i) TRAILER LOTS. Each trailer lot shall be at least 8 feet wider than the trailer, and the length of the lot shall afford a space of at least 10 feet in the rear, exclusive of the trailer and car length. A roadway of at least 20 foot width shall be provided for each row of trailers. Camp grounds shall be reasonably level and have good drainage.

#### **ENCEPHALITIS, ENCEPHALOMYLITIS (Sleeping Sickness)**

##### **Regulation Number 59.**

Lethargic, equine and other infectious forms shall be reported.

Isolation of patient during the acute stages. The patient should be isolated for one to two weeks after onset of illness. Exposed individuals need not be restricted to the premises.

Concurrent disinfection of discharges.

Thorough screening of the patient and premises is required in cases of equine or other infectious forms.

Incubation period. It is likely that it extend from two days to a week or longer.

Prevention. The patient should be isolated for a period of one to two weeks but exposed persons need not be quarantined.

# INDEX

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	Page
Adoptions .....	26
Birth certificate of adopted child .....	26
Animals, disposal of dead .....	65, 150
Anterior Poliomyelitis .....	78
Anthrax .....	79
Army Surgeons and Practice .....	30
Asiatic Cholera .....	79
 Barbers .....	 144
Chemical Sterilizing Agents .....	146
Instructions to .....	147
Basic Science Law .....	32
Bathing Places .....	152
Births, Registration of .....	13, 113
By Whom .....	13
Unregistered .....	20
Board of Health	
City .....	55
County .....	46, 121
State .....	5
Township .....	53
Books, disinfection .....	77, 151
Building Sanitation .....	126
Burial, duty of relatives and public .....	42
Burial of Dead Animals, Law .....	65
Burial Permit .....	16, 18
Casket, Records Enclosed .....	18
Signed by Whom .....	16
Camps, construction .....	142
Cars, Railway in Service .....	136
Caskets, records required .....	18
Cemeteries, construction of burial structures .....	44
Refuse burial without permit .....	18
Removals .....	44
Certified Copies, vital statistics records .....	20, 24
Cesspools and Privies .....	123
Chicken Pox .....	79
City Boards of Health .....	55
Power to Appoint .....	55
Cleaning, of Railway Cars .....	136
Communicable Diseases .....	71
Adoption of Regulations .....	71

	Page
Notifiable Diseases .....	71
Violations and Fines .....	67, 71
Conjunctivitis, acute infectious .....	56, 84
Construction, Camps .....	142
Companies .....	142
Of Buildings .....	126
Public Bathing Places .....	152
Control of Communicable Diseases .....	73
Corpses .....	119
Permit for Removal .....	16
Cosmetic Therapy .....	147
County Board of Health, duties .....	48, 121
Compensation .....	46
County Nurses .....	50
Duties of .....	51
Meetings .....	47
Membership .....	46
Powers .....	47
Records and reports .....	47
Superintendent, duties .....	48
Unorganized Counties .....	8
Vacancies .....	46
Violation of Rules, penalty .....	69
Creameries .....	125, 150
Cup, common drinking .....	150
Dairy Products, prohibiting sale of .....	75
Dead Animals, Disposal of .....	65, 150
Dead Bodies, custody and control .....	42
Dead, transportation of .....	116
Death Certificates .....	14, 113
Deaths, unregistered .....	20
Dining Cars .....	138
Diphtheria .....	79
Diseases, notifiable .....	71
Disinfectants .....	76
Disinfection of premises .....	74, 79
Disinterment of dead .....	118
Disposal of dead .....	115
Divorce Records .....	13
Drinking Cups, Common .....	150
Duplicate Licenses .....	112
Dysentary .....	132
Electric Baths .....	39
Embalmers .....	115

	Page
Embalming Fluid .....	115
Embalming .....	115
Epidemic Diseases .....	121
Erysipelas .....	81
Examination, medical—(see Licensing Boards)	
Basic Science .....	32
Feeding Yards .....	150
Fees, Medical Examination .....	108
Basic Science Examination .....	36
Food Handlers Law .....	63
Regulation .....	75
Garbage .....	125
Glanders .....	81
Gonorrhea, regulation .....	96
Discharge of cases .....	99
Historical Societies, Records of .....	20
Homes for Care of Infants .....	128
Homes, maternity .....	40, 126
Hookworm Disease .....	81
Hospital, detention .....	49, 54
Hospitals and Almshouses, Records of .....	13
Hygiene, school .....	103
Industrial Wastes .....	154
Infant Blindness (see Ophthalmia Neonatorum)	
Infants, homes for care of .....	128
Influenza .....	81
Inspection, sanitary .....	151
Isolation, Defined .....	72
Itinerant Physicians, Licenses Required .....	29
Laboratories, State Health .....	30, 106
Leprosy .....	83, 134
License, Application for Medical .....	108
Recording .....	29
Licensing Boards, Medical .....	27
Basic Science .....	32
Examinations .....	27
Regulation .....	108
Malaria .....	83
Marriage Records .....	13
Premarital blood test .....	61
Maternity Homes, regulation .....	126

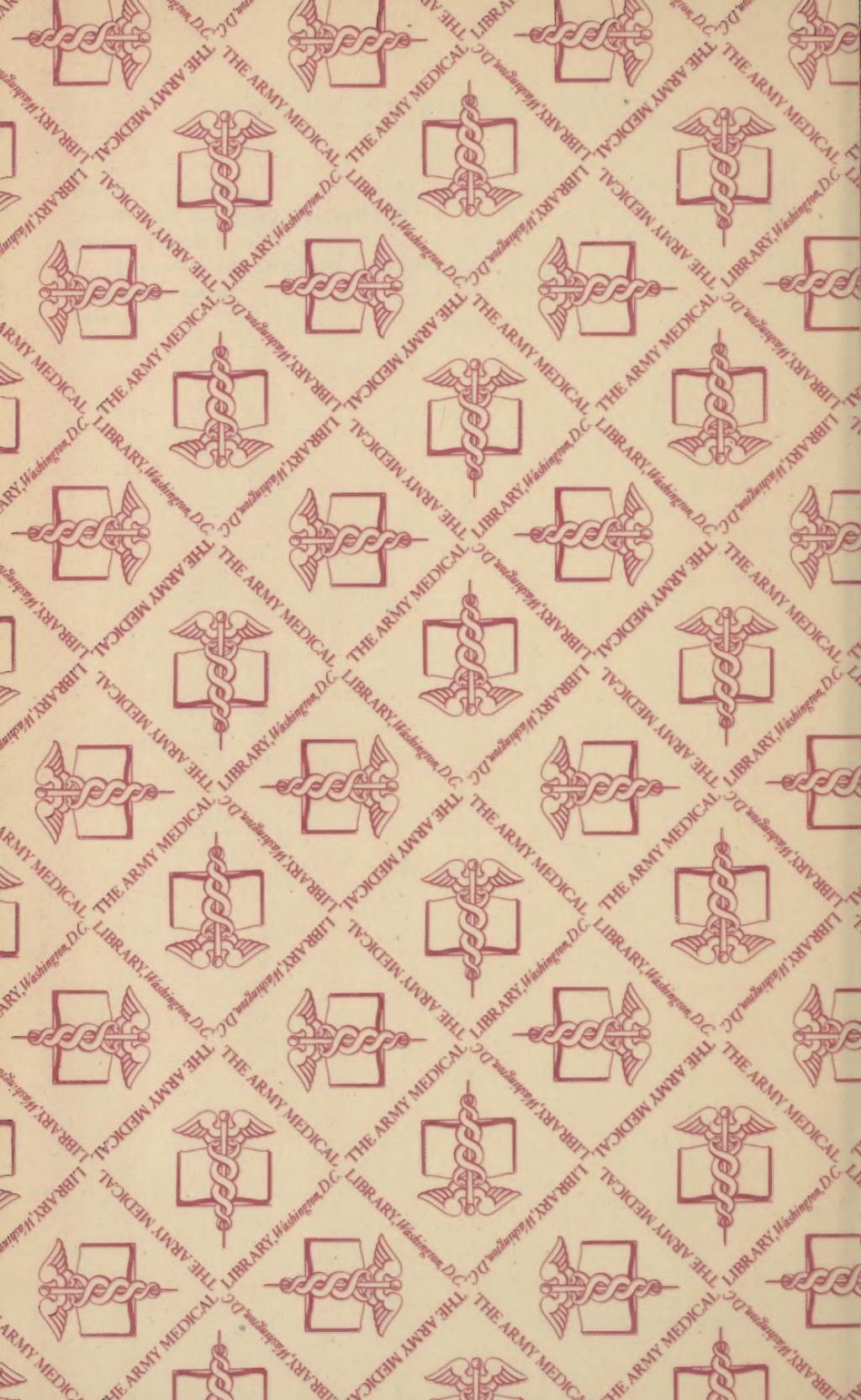
	Page
Definition .....	40
Licenses .....	40
Records of Birth .....	41
Mausoleums .....	44
Measles .....	83
Medical License Examination .....	27, 108
Meetings, County Boards of Health .....	47, 122
Meningococcus Meningitis .....	85
Milk, Prohibiting Sale .....	75
Pasteurization .....	153
Municipal Food Handlers Ordinance .....	63
Municipal Water and Sewage .....	123
Naturalization Records .....	13
Notifiable Diseases .....	71
Nurses, County .....	50
Public Health .....	102
Observation, Regulation .....	73
Offensive Trades or Business .....	150
Ophthalmia Neonatorum, Law .....	56
Regulation .....	84
Pasteurization Plants, Approval Required .....	153
Pellagra .....	85
Penalty Provisions .....	67
Pest Houses .....	49
Physicians, License—(See Licensing Board)	
Registration .....	12
Placarding .....	73
Plague .....	86
Pneumonia .....	86
Poliomyelitis, Anterior .....	78
Practice of Medicine, without license .....	68
Premarital Blood Test .....	61
Prenatal Blood Test .....	60
Privies and Cesspools .....	123
Frotection, Health of School Children .....	100
Library Books .....	151
Public Bathing Places .....	152
Public Funds, Payment to Physicians .....	64
Public Health Nurses .....	102
Puerperal Fever .....	86
Pulmonary Tuberculosis .....	90, 134
Quarantine, Defined .....	72
By County Boards of Health .....	121
Quarterly Reports, County Boards of Health .....	121

	Page
Rabies .....	86
Railway Sanitary Code .....	131
Railway Stations .....	139
Reciprocity, Medical Licensure .....	110
Recreational Areas .....	153
Registration, Local (see Vital Statistics)	
Regulations, Adoption of .....	71
Violation of .....	67
Removal Permit (see Burial Permit)	
Rendering Establishments .....	150
Rocky Mountain Spotted Fever .....	87
Roller Towels .....	151
Sanitary Code, Railway .....	131
Sanitary Inspection .....	151
Sanitation, Building .....	126
Scarlet Fever .....	87
School, Exclusion from .....	73, 100
School Children, Health of .....	100
School Hygiene .....	103
Septic Sore Threat .....	88
Sewage Disposal .....	123
Slaughter Houses .....	150
Smallpox .....	89
Stables .....	150
State Board of Health	
Accounts and Expenses .....	5
Action, Appeal From .....	9
Compensation and Expenses .....	5
Members, Appointment and Terms .....	5
Officers .....	5
Powers .....	6
Regulations, Publication of .....	7
Reports, Biennial .....	9
State Funds, Payment to Physicians .....	64
State Health Laboratories, Regulation .....	106
Stations, Railway .....	139
Sterilizing Fluids, Barbers .....	146
Stillbirth Certificates .....	32
Syphilis (see Venereal Disease)	
Premarital Blood Test .....	61
Prenatal Blood Test .....	60
Tanneries .....	150
Tetanus .....	90

	Page
Towel's, Roller .....	151
Township Boards of Health .....	53
Trachoma .....	90
Transcripts, Vital Statistics Records .....	20, 24
Transportation of Dead .....	116
Transportation of Persons With Infectious Diseases .....	131
Travel, Restrictions on .....	131
Trichiniasis .....	90
Tuberculosis, Other Types .....	93
Tuberculosis, Pulmonary .....	90, 134
Tularemia .....	93
Typhoid Fever .....	94, 132
Typhus Fever .....	95
Undertakers, Registration With Local Registrars .....	12
Undulant Fever .....	95
Vaccination, Law .....	55
Venereal Disease, Law .....	58
Examination of Prisoners .....	58
Penalty .....	69
Regulation .....	96
Regulation, Board Empowered to Make .....	59
Reports, By Whom .....	58
Treatment Required .....	58
Vital Statistics, Agency Charged With Recording of .....	11
Certificates, Information Required .....	113
Certified Copies	
Births .....	20, 24
Deaths .....	20, 24
Marriages .....	20, 24
To War Veterans .....	20, 24
Dead, Disposal of .....	115
Transportation of .....	116
Director .....	11
Duties of .....	11, 23
Fees, For Informant .....	23
Forms, Correction of .....	113
Birth Forms .....	113
Death Forms .....	113
Registrars, Local .....	11
Duties of .....	12, 21
Fees .....	23
Neglect of Duty .....	12
Stillbirths .....	113

	Page
Wastes, Creamery .....	125
Water and Ice Supplies, railway .....	135
Water Supplies .....	123
Provided by Common Carriers .....	135
Whooping Cough .....	100
Yellow Fever .....	100







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